Ontario

Advisory Council on Occupational Health and Occupational Safety

Twelfth Annual Report
April 1, 1989 to March 31, 1990

Mandate and Objectives

The function of the Advisory Council is and it has power to*:

a) make recommendations to the Minister of Labour relating to programs of the ministry in occupational health and occupational safety; and
b) advise the minister on matters relating to occupational health and occupational safety which may be brought to its attention or be referred to it.

To achieve this Council has set the following objectives:

Primary Objective

To advise the Minister of Labour on all matters relative to occupational health and safety in Ontario.

Secondary Objectives

1. To ensure as far as is possible that the policies and programs in occupational health and safety effectively minimize the risks to health and safety in all workplaces in Ontario.
2. To ensure as far as is possible that knowledge about occupational health and safety is available to management, labour and the public and that it is understood by them.
3. To assist in promoting and establishing mechanisms involving management and labour to solve problems in occupational health and safety.
4. To ensure as far as is possible that there is appropriate manpower training and development for the occupational health and safety field.
5. To review periodically the effectiveness of the policies and programs implemented to achieve secondary objectives 1 to 4.**

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* The Occupational Health and Safety Act. s. 10(7).
** added June, 1980

Advisory Council on Occupational Health and Occupational Safety

Twelfth Annual Report April 1, 1989 to March 31, 1990

400 University Ave.
11th Floor
Toronto, Ontario
M7A 1T7

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Ontario

Advisory Council on Occupational Health & Occupational Safety

Conseil consultatif sur la santé et la sécurité au travail

Office of the Chairman

Bureau du président

400 University Ave
Toronto, Ontario
M7A 1T7

416/326-1350

400, avenue University
Toronto (Ontario)
M7A 1T7

416/326-1350

June 1, 1990

The Honourable Gerry Phillips
Minister of Labour
400 University Avenue
14th Floor
Toronto, Ontario
M7A 1T7

Dear Mr. Phillips:

I have the honour to submit the Twelfth Annual Report of the Advisory Council on Occupational Health and Occupational Safety for the fiscal year 1989-90.

Yours truly,

J Barling

Julian Barling
Chairman

Attachment

Advisory Council on Occupational Health and Occupational Safety
Members and Officers 1989-1990

J.I. Barling* (1990)
Chairman
Queen's University
Kingston

G. Botic (1990)
CAW – Canada
Willowdale

T. Byrne (1990)****
Provincial Building & Const. Trades Council of Ontario
Etobicoke

A.G. Cecutti (1991)†
Falconbridge Ltd.
Falconbridge

J.H. Couse (1991)††
Maple Leaf Mills Ltd.
(retired)
Thornbury

D.N. Dewees (1989)†††
University of Toronto
Toronto

J.C. Divitt (1991)††††
Canadian Union of Public Employees
Scarborough

R. Falconer (1990)****
United Steelworkers of America
Toronto

T.M. Fraser (1990)
University of Waterloo
(retired)
Niagara-on-the-Lake

D.R. McCalla** (1989)‡
(Chairman)
McMaster University
Hamilton

P. Morasse*** (1991)‡‡
Quebec and Ontario Paper Co. Ltd.
St. Catharines

D.G. Morrison (1989)****
Goodyear Canada Inc.
Etobicoke

H.D. Moyer (1990)‡‡‡
General Motors of Canada
(retired)
Oshawa

K. Signoretti (1991)‡‡‡‡
Ontario Federation of Labour
Don Mills

D. B. Smith (1990)†††
Ellis-Don Ltd.
London

C.J. Tuohy (1990)†††
(Vice-Chairman)
University of Toronto
Toronto

D. Ublansky (1988)†††
Energy & Chemical Workers Union
London

J.L. West (1990)
University of Windsor
Windsor

V. Biggar
Executive Co-ordinator – Research and Admin.

P.L. Chan
Research Officer
(Part-time from Dec. 1. 1989)

J. Eakin *(Part-time)*
Research Officer

S. Spencer
Research Officer

N.R. Subramanian
Administrative Assistant

Members' terms expire(d) on November 30 of the year in parentheses except where indicated

* Appointed chairman effective August 1, 1989
** Resigned as of July 1989
*** Appointed June 12, 1989
**** December 10
† March 24
†† January 31
††† October 31
†††† December 9
‡ July 31
‡‡ June 11
‡‡‡ November 1
‡‡‡‡ March 31

Preface

The Advisory Council has traditionally used the introductory section of its annual report as a forum to share some general observations on selected matters of significance for the future of occupational health and safety in Ontario. This year, Ontario is facing the prospect of a new era in occupational health and safety as the Ontario government takes significant steps in a movement toward bipartism and toward the development of a Workplace Health and Safety Agency. The Introduction of this, council's twelfth, annual report focuses on developments in the direction of bipartism and, in so doing, council contrasts Ontario's 'bipartism' with multipartite systems elsewhere and attempts to identify factors that it considers will play a role in determining the success of the approach. Council also touches on challenges ahead and on concern in the area of occupational health and safety in the agricultural sector. This latter issue is one that council is giving further consideration with a view to developing advice to the Minister of Labour.

Council deliberations resulting in advisory memoranda to the minister during 1989/90 included the development of advice on Bill 208 and amendment of the *Occupational Health and Safety Act* and issues concerning small business and education and training. These advisory memorandum (89-I, 89-II and 89-III, respectively), together with correspondence with the minister on these and other matters, are set out in full in this report.

Further consideration was also given by council to biotechnology and the process of policy development in biotechnology. Correspondence surrounding this issue is included in the annual report, while council's advice pursuant to this will be part of council's next report.

At the beginning of 1990, council established a task force on stress. The task force, whose membership was drawn from that of council, is considering matters including strategies to prevent and deal with problems associated with stress in the workplace. It is expected that the task force will be reporting to council and that council will be providing advice to the minister within the 1990/91 fiscal year.

On the basis of a request in March 1990, council will also be addressing the issue of exemption from mandatory use of protective equipment and providing the minister with a statement of council's current recommendation on this subject.

The last section of this year's annual report contains administrative matters, including council's mandate under section 10 of the *Occupational Health and Safety Act* and details of the terms of reference, meetings and membership of council and its task forces.

Worker's Compensation Board of Ontario statistics that have normally appeared as appendices at the end of council's annual reports and have included figures for compensated disabling injuries and fatalities by industry and by detailed Standard Industrial Classification, were, for the most part, not available. Unfortunately, as a result, no such appendices have been included this year.

As always, council remains indebted to the non-council members of its task forces, who were appointed to the committees on small business and biotechnology for their expertise, for their valuable assistance. Council also expresses its gratitude for the help and co-operation it has received from members of labour, management and the public and from private and public associations and agencies, including educational institutions.

Dr. Dennis McCalla resigned as chairman of council as of July 1989 after serving on council since November 1982 and, since February 1984, as chairman. The combination of expertise, concern and perspective he brings to occupational health and safety and provided to council made an invaluable contribution for which council is grateful. Council wishes him well in all his future endeavours.

Dr. Julian Barling was appointed chairman of council effective August 1990. Council welcomes his contributions to this field and the opportunity of working with him as chairman.

Dr. Donald Dewees and Dr. Douglas Morrison left council on the expiry of their terms, having served for seven years and three years respectively. Council thanks them for their many valuable contributions.

Council was pleased to welcome Mr. Ken Signoretti as a new member of council in April 1989 and Mr. Paul Morasse as of June 1989.

INTRODUCTION

Dawning Of A New Era

The Ontario government has embarked on a unique experiment in the development of policy-making structures for occupational health and safety. This experiment is based upon a principle of bipartism which, in its purest form, entails equal authority for two parties. In this context, labour and management would share equal authority on bodies which make crucial decisions in the occupational health and safety field.

A move toward a joint labour-management approach was already evident in the *Occupational Health and Safety Act* passed in 1979 when, among other things, the requirement for joint health and safety committees was introduced. There have also been a number of other initiatives to involve labour and management in various aspects of policy and regulation development. These have included the establishment of a variety of advisory bodies with equal numbers of representatives from management and labour and, invariably, a 'third party'.

The establishment, in 1987, of the Joint Steering Committee on Hazardous Substances in the Workplace was another significant step toward bipartism. The joint steering committee has a mandate to develop and review regulations for hazardous substances made under the *Occupational Health and Safety Act*. The committee consists of equal numbers of representatives from 'management interests' and 'organized labour' and is chaired by the Ministry of Labour's assistant deputy minister for occupational health and safety.

The most recent movement toward bipartism, contained in Bill 208*, is to provide for the establishment of a bipartite agency whose mandate is, primarily, to deal with occupational health and safety education and training. There is also a provision in Bill 208 (with regard to funding) to require an equal number of representatives of workers and management on boards of safety and accident prevention associations and occupational health and safety training centres.

As an advisory body consisting of labour, management and others (as provided for under Section 10 of the *Occupational Health and Safety Act*), the Advisory Council has always emphasized the importance of involving affected parties. Thus, council is very interested in observing this move toward bipartism. Council believes that the form of bipartism being proposed in Bill 208 is unique because it differs not only from the 'tripartite' collaborative models that have been developed elsewhere, but also from some other bipartite models. In this section of the Introduction, council contrasts Ontario's 'bipartism' with multipartite systems elsewhere and attempts to identify factors that it considers will play a role in determining the success of the approach.

In theory, 'tripartism' generally implies equal authority for labour, management and government. In practice, authority is rarely equal but there is still a significant role for each of the parties. Likewise, the number of representatives from each 'party' may not be equal, or, one vote for a third party can be a deciding vote. Various forms of tripartism underlie regulatory structures in Sweden, Britain, and some provinces within Canada, e.g. Quebec and New Brunswick.

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* *An act to Amend the Occupational Health and Safety Act and the Worker's Compensation Act.*

A form of bipartism characterizes the work-injury insurance institutes of West Germany and France. These bipartite institutes were established in the late 19th and early 20th centuries and reorganized after the Second World War as administrative arms of the state. They function as part of the complex set of contributor- and beneficiary-administered institutions that characterize the French and German welfare states.

In contrast, Ontario's nascent bipartism builds upon the advantages of the North American tradition of adversarial collective bargaining, tempered with an appreciation of the consensus-building potential of the European models. At the root of Ontario's bipartism is the 'Wagner Model', which underlies North American labour relations. Under this model, which takes its name from the Wagner Act of 1935 in the United States, labour and management recognize each other as legitimate adversaries. Conflict between them is not denied, but it is regulated through agreed upon rules and structures. The role of government is to enforce these rules for the regulation of conflict and to act as arbiter in disputes that cannot be resolved through negotiation.

There are strong elements of this model in existing and proposed structures in Ontario. In the *Occupational Health and Safety Act* passed in 1978, either party to a dispute in the workplace has the right to appeal to the government. In Bill 208, there is a proposal to appoint an adjudicator to resolve disputes. Because it has been felt that occupational health and safety issues (more than other issues in labour-management relations) afford some common ground for labour and management, the Ontario structures also incorporate some consensus-building elements - notably, the government chair for the Joint Steering Committee and the neutral chair that has been proposed for the agency.

It is considered that, for this model to succeed in Ontario, certain conditions must be met. As is the case under the Wagner Model, both parties must recognize the legitimacy of the other. Just as importantly, the 'representatives' must be recognized as legitimate by their own respective constituencies. Mechanisms for representatives to remain in touch with constituencies, to report back, and to ensure that the representatives remain sensitive to the needs of the varying interests must be established. Negotiators who do not have the trust of their constituents or the recognition of their opponents cannot be effective. Thus, much consideration must be given by both labour and management to the selection of their representatives. Also, both management and labour must be committed to making the system work. For the system to work the parties must have equal access to the resources relevant to discussions and negotiations; notably, to scientific and technical information and expertise. Lastly, consistent with labour relations within the Wagner Model, there is an important role for government. Government has a role to ensure that both parties act in a manner consistent with their recognition of each other as legitimate participants in the process. Also, government must ultimately resolve those disputes in which labour and management fail to come to agreement. Council emphasizes that a need for adjudication is inevitable and should not, necessarily, be viewed as an indication of failure of the system. At least until this bipartite model is more deeply and broadly established in Ontario, the government must continue to play a major role in enforcing health and safety standards.

Because of its uniqueness, it will be interesting to observe the functioning of a decision-making structure which incorporates both adversarial and consensus-building elements. Council believes that, if the conditions described above can be met, the system will achieve the framework to enable its participants to learn from and build upon their mutual experience.

It appears to council that Bill 208, with its legislative amendments to provide for a bipartite decision-making body, represents a significant step in the direction of bipartism. Until now, the 'involvement' of the affected parties has only been in an advisory capacity at the workplace, industry and provincial levels. For example, at the workplace, joint health and safety committees are only advisory to management. As such, labour and management cannot be considered to have equal decision-making authority. At the provincial level, the Joint Steering Committee has a government chair and no legislated mandate. In contrast, Bill 208 provides for the establishment of an agency that is more consistent with the notion of bipartism in its emphasis on equal responsibility between management and labour. At the workplace, equal authority remains elusive, although management would be required, under Bill 208, to be more responsive to health and safety committees (for example, in responding to formal questions from members of the committee).

In the 12 years that have elapsed, numerous changes have taken place. It has been a time of evolution in occupational health and safety - of implementing a new *Occupational Health and Safety Act*, working out priorities and practical details of implementation, and searching for more effective mechanisms for dealing with issues. Council, in this time, has offered advice on a wide range of topics including early advice on small business (in 1979), various aspects of education and training, and on the need for involving the affected parties.

It is of interest that the advice in this, council's twelfth, annual report, also deals with small business (Advisory Memorandum 89-II) and with education and training in occupational health and safety (Advisory Memorandum 89-III) and comments on the proposed amendments contained in Bill 208 (Advisory Memorandum 89-I). The underlying theme throughout these documents is the importance of education and training and labour-management participation.

In council's current advice on education and training, the need for a two-pronged approach is identified. One strategy addresses the urgent need to get information and knowledge to the present workforce so that accidents and illnesses can be prevented. The other is a long-term strategy to develop awareness of occupational health and safety issues. The aim of this long-term strategy is to integrate occupational health and safety into all aspects of education and training throughout the education system, so that health and safety will become a way of thinking and guide our everyday behaviour.

The assumption is that high quality and appropriate education and training will enhance health and safety in the workplace. However, with advances in science and technology and in our understanding of the interaction between people and their work environments, this last decade of the 20th century will provide new challenges and new opportunities for the development of innovative solutions. The challenges include dealing with new workplace technologies; increasing automation; changes in person-machine interactions, especially in terms of computerization; low-dose non-ionizing radiation; problems associated with the changing nature of jobs; different and unknown factors in biotechnology; increasing demand for work in the service sector; more flexible working arrangements; contract work; and the stresses associated with the work environment and the implications of the increasingly rapid changes in work and the work environment, e.g. uncertainty and insecurity and training and retraining to meet the changing needs.

Over and above the variety of changes that will take place, the *rate* of change in the work environment is increasing. To cope successfully, the system will have to remain flexible and be reviewed frequently and the structures or bodies that have authority to make decisions will have to be forward-looking, flexible and sensitive to the needs of all the parties involved. Perhaps the greatest challenge will be for decision-making bodies to establish and retain credibility with those who have to implement the decisions that are made, and those whose work lives will be governed by these decisions. Council considers that the only way that this will be possible is for those people with responsibility for decision-making to maintain close contact with their constituents, listen carefully to their needs, and engage in ongoing dialogue about issues that are being dealt with. The decision-makers have to be committed to the process and accountable to their constituents. In turn, constituents have to be willing and able to accept and implement the decisions.

Council considered the unique experiment on which we are about to embark to be of sufficient importance to begin this Introduction to the 12th Annual Report by commenting on it. Similarly, council believes that it is appropriate to conclude this Introduction by highlighting a problem of considerable and continuing concern.

Council's primary objective is 'to advise the Minister of Labour on all matters relative to occupational health and safety in Ontario'. The first of its secondary objectives is 'to ensure as far as is possible that the policies and programs in occupational health and safety effectively minimize the risks to health and safety in all workplaces in Ontario.'

In its advice on amendments (Advisory Memorandum 88-I), council indicated the importance of the Act setting out basic rights, responsibilities and duties that are applicable to *all*. It went on to recommend 'that there should be no all-encompassing exemptions or exceptions from either the application of the Act or any of its major provisions' (ACOHOS Recommendation 88-3).

Council is very concerned that the principle of universality still does not apply to occupational health and safety in Ontario. There are still sectors of working people not afforded the same opportunity for protection. In Advisory Memorandum 89-I council makes comments on the application of the Act and the exemption of farming operations.

It is recognized that health and safety in agriculture is a topic that has been considered recently by a multi-disciplinary task force and an implementation committee. However, council considers that the issue of health and safety in agriculture is a serious concern. Statistics continue to indicate that health and safety in the agricultural sector warrants urgent attention. Accordingly, council is currently considering the issue of health and safety in the agricultural sector with a view to developing advice to the Minister of Labour.

In conclusion, a retrospective glance at occupational health and safety in Ontario over the last decade reveals that changes have certainly occurred. This does not preclude the need for continuing review of the system. On the contrary, the new era of occupational health and safety we are entering implies that more changes based on continued and in-depth review are likely and are to be welcomed.

COUNCIL'S ADVISORY MEMORANDA

Ontario

Advisory Council on Occupational Health & Occupational Safety

Conseil consultatif sur la santé et la sécurité au travail

Office of the Chairman

Bureau du président

400 University Ave. Toronto, Ontario M7A 1T7
416/965-2448

400, avenue University Toronto (Ontario) M7A 1T7
416/965-2448

June 28, 1989

The Honourable Gregory Sorbara
Minister of Labour
400 University Avenue, 14th Floor
Toronto, Ontario
M7A 1T7

Dear Mr. Sorbara,

On behalf of council I am pleased to forward Advisory Memorandum 89-I: Concerning Bill 208: An Act to amend the Occupational Health and Safety Act and The Workers' Compensation Act.

During its review of Bill 208, council also considered whether or not the proposed amendments addressed previous council advice.

Council sincerely hopes that the comments, questions and advice contained in this document will be of value to you in your consideration of the Act and proposals for amendments.

Yours truly,

D. R. McCalla
Chairman

Attachment

cc: G. R. Thompson
T. J. Millard

Advisory Memorandum 89-I to the Minister of Labour June 28, 1989

Concerning Bill 208: *An Act to amend the Occupational Health and Safety Act and The Workers' Compensation Act*

BACKGROUND

In the eleven years of its existence, council has given advice to the minister on many different issues relating to occupational health and safety. A number of its recommendations have dealt specifically with the legislation and, in some cases, amendments have been proposed. As a result of a special meeting of council devoted entirely to reviewing the Act and various proposed amendments, council, in July 1988, submitted advice to the minister *Concerning Amendments to the Occupational Health and Safety Act* (Advisory Memorandum 88-I). That document set out some fundamental principles and suggestions regarding the occupational health and safety legislation and its development in Ontario.

In January 1989 the minister introduced Bill 208 (*An Act to amend the Occupational Health and Safety Act and The Workers' Compensation Act*) into the legislature. As many of the proposed amendments had previously been included in Bill 106* and its predecessor (Consultation Draft: *Occupational Health and Safety Amendment Act*), it is not surprising that a number of the issues that council had commented on in Advisory Memorandum 88-I were addressed in the Bill.

INTRODUCTION

Council has reviewed Bill 208 and compared the proposed amendments with those in Bill 106. This advisory memorandum contains a commentary on some of the proposed amendments and the degree to which they address council's previous recommendations. Not all the proposed amendments were discussed at length and, in some cases, council's comments were not considered substantive or sufficiently researched to be included. In a few cases issues were discussed but no consensus evolved.

As with the discussions that led to Advisory Memorandum 88-I, council's discussion was limited, to some extent, by the fact that the proposed legislation is public and management and labour have already developed firm positions on some specific items. As the positions are often different and, in some cases, based on long-term commitments of the respective groups, concern was expressed that attempts to reach consensus on some of these issues could jeopardize the positions of the members in further discussions with the minister and for presentations to the legislative committee considering the Bill. In some cases, the issues on which no consensus was reached have been noted and, in a few instances, various points of view have been included.

---

* Bill 106, *An Act to amend the Occupational Health and Safety Act*. First reading June 29, 1987.

This advisory memorandum contains council's comments, including references to its previous advice/recommendations, questions and advice arranged according to the relevant section of the Act as it would be amended by Bill 208. It is hoped that the comments are largely self explanatory; however, in some cases, reference to the relevant section of the Act and the proposed amendment will be necessary.

REVIEW, QUESTIONS, COMMENTS AND RECOMMENDATIONS

As the exemptions from the Act and its various provisions have changed since the Act was originally enacted in 1979 (and since further changes are now proposed), it is suggested that the Act have a preamble that, in addition to stating the purpose of the Act, makes it clear that it is all inclusive except where specific exemptions are made.

Section 1 (interpretation)

It is unclear whether constructors are included in the definition of an employer, i.e., do the duties of an employer apply to a constructor? If constructors are included as employers, why do the amendments include the insertion of 'constructor' in sections 8(2) and 8(14)? and why do the proposed new subsections of sections 7, 8 and 8b all include 'constructor or employer'? (It is understood that these additions were in recognition of the fact that, with the amendments proposed in Bill 208, these subsections would also apply to constructors, i.e. projects with more than 20 workers would also be required to have committees, but if the term 'employer' also included 'constructor', these additions would not be needed.) If, however, constructors are not included in the definition of employers, it would appear that large sections of the Act, such as those dealing with WHMIS (sections 22a-g), do not apply to constructors.

ACOHOS RECOMMENDATION 89-1

> that it be made clear in the Act that the duties of an employer also apply to a constructor.

Council notes that this could be done by either modifying the definition of employer so that constructors are also included or adding 'or constructor' to each section that specifies a duty for an employer.

Section 3 (application)

In Advisory Memorandum 88-I, council recommended that there should be no all-encompassing exemptions or exceptions, either from the application of the Act or from any of the major provisions. As Bill 208 does not amend section 3, the Act would still not apply to farming operations. It is noted that the Agricultural Health and Safety Implementation Committee, which reviewed the recommendations of the Ontario Task Force on Health and Safety in Agriculture, rejected the recommendation for a separate agency to be responsible for agricultural health and safety. Instead, it suggested that the responsibility be assigned to existing agencies, primarily the Farm Safety Association, noting that there would be a need to 'expand the mandate of, and the funding available to, the Farm Safety Association.'

Farming operations fall into broad categories such as 'industrial-type' operations, for example, mushroom growing, produce packing, etc. and 'non-industrial' operations. As industrial-type farming is similar to other industrial operations, council considers that the workers should have the same protection as other workers under the Act and regulations and it recommends that industrial-type farming operations be included under the Act and covered by regulations that apply to industrial establishments. It is recognized that there would be some difficulties implementing the requirements of the Act for non-industrial operations; for example, many are small, family farms and/or may have large influxes of seasonal, often migrant, workers. It is noted, however, that other sectors included in the Act also experience difficulties for similar reasons, but are, nonetheless, included under the Act. For example, small, family businesses occur in most sectors and, in construction, the work force is often transient and seasonal, the workplaces are not clearly defined and engineering controls would often not be feasible.

Recognizing that different means may be needed to achieve protection, council stresses that workers on farms, regardless of whether they are family members, permanent hired help or seasonal migrant workers, should be offered protection equivalent to that available to other workers.

ACOHOS RECOMMENDATION 89-2

that the Minister of Labour ensure that workers in farming operations are provided with the same opportunity for protection as workers in other operations.

Section 7(1) (mandatory selection of health and safety representative)

Council notes that this proposed amendment partially addresses ACOHOS Recommendation 88-4. The concept of requiring a representative at all workplaces, as well as projects, where no joint health and safety committee is required is consistent with council's advice; however, council's recommendation did not specify a lower limit for the number of employees and it recommended that joint health and safety committees be required in all workplaces in which the number of employees regularly exceeds 10.

Section 7(6) and Section 8(8c) (inspections)

In Advisory Memorandum 86-II (ACOHOS Recommendation 86-14), council recommended that monthly inspections of the workplace be required (with exceptions approved by a Director).

Because of the importance of inspections by representatives of workers, concern was expressed that inspections of 'at least part of the workplace in each month' '... so that in each 12-month period all of the workplace is inspected' could be interpreted to mean that each part of the workplace needs to be inspected only once in every 12 months. It is recognized that such a provision may be appropriate in some large, complex workplaces that contain areas that are infrequently used (such as in mines) and that would not need inspecting as frequently as more hazardous areas or areas that are used more often by more workers. It is noted that under Bill 106, the representative or committee member would have had the power to inspect at any time and would have been required to inspect at least part of the workplace each month.

that the Act be amended such that the area of the workplace to be inspected each month by:

a) a worker member of a joint health and safety committee [under section 8(8c) and 8(8d)] be determined by the joint health and safety committee;

b) a health and safety representative [under section 7(6) and 7(6a)] be determined in consultation with management and be subject to an appeal to the ministry.

Section 7(7a)(a), Section 8(6)(e) and Section 8b(3) (powers of representatives to be present at the beginning of testing)

Concern was expressed about the potential for abuse of the provision entitling a representative or worker member to be present at the beginning of testing in situations where routine testing is carried out on a regularly-scheduled basis. However, it is considered important that the health and safety representative or committee member be consulted and be entitled to be present at the beginning of testing, unless, in the case of section 8, the joint health and safety committee specifies otherwise. It was suggested that, in some cases, such decisions or determinations could be included in the workplace policy and/or procedures.

Section 8(1)(a) (exemption from the requirement to have a joint health and safety committee)

This proposed amendment, which removes most of the exemptions from section 8, is consistent with council's advice in Advisory Memorandum 88-I. ACOHOS Recommendation 88-3 stressed that 'there be *no all-encompassing* exemption or exceptions from the application of the Act or any of its major provisions', and ACOHOS Recommendation 88-4 that 'all workplaces in which the number of employees regularly exceeds 10 be required to have joint health and safety committees ...'. However, the amendment still exempts projects expected to last less than three months.

Council notes that this exemption will include renovation, reconstruction or repair/maintenance of existing workplaces ('shutdowns' or 'turn arounds') that are scheduled to take less than three months. Some of these projects could involve hundreds of workers and be extremely hazardous, such as in the case of work on blast furnaces, certain production lines, etc.

This presents a dilemma: on the one hand, legislation to protect health and safety in the workplace emphasizes the importance of joint health and safety committees and their functions (this is reinforced by the amendments proposed in Bill 208 requiring special training and added power to selected committee members), yet the effect of the proposal is to exempt from the requirement to have committees, projects considered by many to be among the most hazardous. On the other hand, it might be difficult to establish committees and have members specially trained and certified for short-term jobs, especially when the projects may involve many workers from different trades and/or contractors.

In considering strategies for addressing this issue, council noted that:

- all other sections of the Act still apply, i.e., the rights and responsibilities of workers, employers, constructors; the requirement for health and safety representatives, etc.;
- projects will vary considerably in nature and size as well as in type and degree of hazards;
- strategies will also have to vary, e.g. what may be an effective strategy for a shutdown may not be appropriate/practical for a new project;
- the role of the ministry varies according to the nature of the project;
- because of the differences, specifying strategies in legislation could be unduly restrictive.

Various strategies were suggested. For example:

- for short-term projects at workplaces that already have joint health and safety committees, there should be liaison between the health and safety representative(s) for the project and the workplace committee;
- that, in the absence of inspection by joint health and safety committees, the frequency and comprehensiveness of ministry inspections should be increased, and
- for each new project, a mechanism for overseeing occupational health and safety should be worked out between the owner/client and constructor.

ACOHOS RECOMMENDATION 89-4

> that there be a requirement in legislation that a procedure to ensure compliance with the Act be specified in writing and agreed to by the owner/client and constructor prior to commencement of a project and that the procedure be included in the contract.

It is suggested that arrangements for overseeing occupational health and safety be part of the planning for any project and that it be addressed in pre-job conferences.

Concern was expressed that specifying a time limit below which projects would be exempt could tempt constructors to underestimate the duration of the job.

Section 8 (joint health and safety committees)

It is noted that the issue of the administration and functioning of the joint health and safety committee is not covered in the amendments proposed in Bill 208, e.g. frequency of meetings, who calls the meetings, what constitutes a quorum, etc. Bill 106 included reference to guidelines for committees, terms of reference, and the like. Council, in Advisory Memorandum 86-II, made a number of recommendations regarding joint health and safety committees, including: that the required frequency of committee meetings be increased (ACOHOS Recommendation 86-18) and that clear and concise statements of the roles and responsibilities of committee members in the

investigation of work refusals and critical injuries be developed (ACOHOS Recommendation 86-15). Although council believes that many of the administrative details should be dealt with by each committee as appropriate, it endorses the initiative of the ministry developing draft terms of reference for committees that can be adjusted to fit the individual needs of specific workplaces. It is noted that guidelines and terms of reference for committees are often included in collective agreements.

ACOHOS RECOMMENDATION 89-5

a) that joint health and safety committees be required to establish written terms of reference and operating procedures agreed to by both parties, and

b) that the ministry communicate guidelines and draft terms of reference that can be used by joint health and safety committees as a basis for establishing their procedures.

Issues that should be considered by committees, such as the need to consider the problems of language and literacy in the workplace, could be included, either in guidelines or terms of reference. Council, in 1984, submitted advice to the minister on this important issue.*

Sections 8(5a), (5c) and (5d) (committee members to be from the workplace)

The addition of these subsections, which require that worker members be employed at the workplace (5a), that management members exercise managerial functions at the workplace, if possible (5c), and that a member who ceases to be employed at the workplace ceases to be a member of the committee (5d), places a great deal of importance on the definition of 'workplace'. From the definition in section 1 it is unclear whether different buildings or sites operated by the same employer could be considered different workplaces.

The definition of workplace is also crucial for determining the number of employees (at a given workplace) and, therefore, whether one or more joint health and safety committee(s) are required. With the requirement for each committee to have at least two certified members, this issue becomes even more significant.

ACOHOS RECOMMENDATION 89-6

that the definition of workplace in section 1 of the Act be clarified and guidelines for its interpretation be made available.

Council notes that different definitions may be needed for different sectors, e.g., a definition for industrial establishments may not be appropriate for mining or construction projects.

It is suggested that interpretation of what constitutes the workplace for the purpose of determining where committees are required be worked out for each company/business

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* In Advisory Memorandum 84-IV Concerning Policies and Priorities for Dealing With Literacy and Occupational Health and Safety, ACOHOS Recommendation 84-20 recommended that it be part of the mandate of joint health and safety committees to consider the literacy situation in the workplace.

between the employer and workers or their representatives, and that there be a requirement to state, in writing, the arrangements for the committee that have been agreed to by the workplace parties.

ACOHOS RECOMMENDATION 89-7

> that there be included in section 8 a requirement for employers to state, in writing, the arrangements for the committee(s) for their company, business or organization agreed to by the workplace parties.

Council notes the advantages of having members of the committee from the workplace: members know and understand the issues at that workplace; interactions and communications with the work force are important and meetings can be called more easily.

It appears that sections 8(5a) and 8(5b) make section 8(5d) redundant, and council questions:

- why section 8(5d) should apply only to worker members? and
- whether one certified management member (e.g., a safety officer) could be the management member on the committees at a number of different workplaces.

It is recognized that, in the cases of certain construction projects, it will be difficult to have management members from the workplace; however, council stresses the importance of the same requirements applying to management and worker members and suggests that the issue of committee membership and workplace definition be resolved by the affected parties.

ACOHOS RECOMMENDATION 89-8

> that the requirement for joint health and safety committee members to be from the workplace apply equally to workers and management and that the issues of committee membership and workplace definition be resolved by consultation between the affected parties and be subject to appeal to the ministry.

Section 8(5e) (committee to be co-chaired)

This proposed amendment addresses ACOHOS Recommendation 86-12(ii) that joint health and safety committees have co-chairpersons, one chosen by management members and one chosen by worker members, and ACOHOS Recommendation 88-4 '... joint health and safety committees with two co-chairpersons: one representing management and one representing workers.'

Section 8(5f) (certification requirement)

It is unclear from this subsection how, and by whom, members are selected for certification. Council considers it essential, and consistent with other provisions of the Act, that the certified worker member(s) be selected by the workers they are to represent or by their union(s).

ACOHOS RECOMMENDATION 89-9

> that it be specified in section 8(5f) that the worker member(s) of the joint health and safety committee to be certified be selected by the workers they are to represent or, if a trade union or unions represent the workers, by the trade union or unions.

It is assumed that 'at least one member representing the constructor or employer and one member representing workers ...' means 'at least' one member representing workers (should be certified). Presumably, if two workers had been certified by the agency and elected to the committee, both would be able to exercise the rights of a certified member.

ACOHOS RECOMMENDATION 89-10

> that section 8(5f) be clarified by adding 'at least' before 'one member representing workers ...'.

Section 8(6a) (written response to recommendations)

Council strongly supports, and in Advisory Memorandum 86-II recommended, that management be required to respond, in writing, to recommendations from the committee. However, concern was expressed that if a joint health and safety committee meets monthly, and if the requirement for the response is 'within 30 days', management's responses to recommendations made at one meeting may not be in time for discussion at the next meeting. Council suggests that a modification be made to ensure that an appropriate response would be available for consideration at the next meeting. Recognizing that final resolution may not always be possible in a month, there should at least be a report to the committee describing the action taken. This would allow concerns to be followed up and would facilitate the flow of work from one meeting to the next.

Section 8(8f) (information reported to the committee)

This subsection appears to put a *responsibility* on the worker member conducting the inspection to inform the committee of situations that may be a source of danger to workers. It is recognized that inspection of the workplace is an important function of committees. However, the issue of responsibility of the worker member conducting the inspection raises several questions:

- Does this responsibility apply only to the worker member and only as a result of his/her inspection?
- Is there any equivalent responsibility on management members?
- Is there liability associated with this responsibility?
- What responsibility do members have to solicit concerns from workers? In Advisory Memorandum 86-II the importance of the communication process between committees and the work force was stressed.
- Do all workers have a responsibility to inform joint health and safety committees of concerns and/or hazards? It should be stressed that if there is a responsibility

for workers to inform joint health and safety committees of concerns and/or hazards, it should be quite distinct from, and in addition to, the responsibility of workers to inform their employer or supervisor of hazards, etc. [section 17(1)(c) and (d)].

ACOHOS RECOMMENDATION 89-11

that the requirement to inform the committee of situations that may be a source of danger or hazard apply equally to worker and management members of committees.

Section 8(12) and (12a) (entitlement to time from work and to be paid)

These proposed amendments address ACOHOS Recommendation 86-16, 'that the Minister of Labour take steps to amend the Act to allow worker joint health and safety committee members paid preparation time for meetings.' However, it does not appear to address ACOHOS Recommendation 86-19, 'that the Minister of Labour take steps to ensure worker members of joint health and safety committees reasonable time to listen to and discuss workers' concerns about health and safety in the workplace.' It is unclear whether this could be considered part of the proposed amendment if section 8(8f) is a responsibility. [See above, i.e., whether discussing workers' concerns would be part of members' duties and so included in section 8(12)(c)].

Section 8a (worker trades committee)

Council understands that trades committees exist at a number of large construction projects, that they are generally working satisfactorily and that this provision was included following discussion with the affected parties. However, there are many issues that are not clear in the provision, such as the reporting relationship to the committee, structure, chair, etc. It is anticipated that such details would be worked out by each joint health and safety committee. It will be important to stress the *responsibility* of joint health and safety committees on construction projects to establish a worker trades committee.

Section 10

The Workplace Health and Safety Agency

The agency is a new concept, concerning which council has a number of comments and many questions. The mandate of the proposed agency puts emphasis on education and training, the organization and administration of which were not previously included in the *Occupational Health and Safety Act*. Council considers education and training extremely important and it has provided a good deal of advice in the past (e.g. Advisory Memoranda 79-III, 80-I, 81-II and portions of many others). Council has also stressed the need to provide an opportunity for input and the involvement of affected parties. Specifically, management-labour task forces were recommended in ACOHOS Recommendation 81-6 to deal with specific problems and to facilitate the development of occupational health and safety training programs run jointly by management and labour. Further, in ACOHOS Recommendation 81-7, it was recommended 'that the Ministry of Labour, in collaboration with the Workers'

Compensation Board, establish appropriate, continuing arrangements for reviewing and funding labour programs in occupational health and safety, such as the Ontario Federation of Labour program, until such time as new arrangements for joint management and labour training programs are established. The resources made available for funding such programs should be such that labour is given an equal opportunity to develop its understanding and skills in prevention.'*

It is noted that the proposed amendment gives representatives of management and labour, through the Workplace Health and Safety Agency, the responsibility of administering the funding for occupational health and safety research, funding, administering or overseeing medical clinics, safety associations and training centres (as prescribed) and developing, delivering and funding educational and training programs as well as setting and administering standards for these programs. Added to these, the agency would have an adjudicative function and possibly some form of inspection function to determine whether employers have taken sufficient precaution for the prevention of hazards to workers.

Another function of the agency is 'to advise the minister on matters related to occupational health and safety which may be brought to its attention or be referred to it', section 10(7)(j). It is of interest that this is one of the functions given to council in section 10(7)(b) of the current Act. As the amendments proposed in Bill 208 repeal section 10 of the present Act, which establishes council and provides its mandate [section 10(7) a) and b)], council discussed whether or not any of council's functions would not be performed when Bill 208 amends the Act, and, if so, whether or not there would remain a need for these functions.

Council was unable to come to consensus on this issue.

Certain labour members considered it inappropriate for council to make any comments on this issue, noting the resolution adopted by the Ontario Federation of Labour (OFL) at its 1986 annual convention. This resolution adopted the report of OFL's Task Force on Alternative Structures in Occupational Health and Safety, which included the proposal to replace council with two full-time watchdog groups, one labour and one management. It was considered that this clearly stated the OFL position on the issue of alternative structures.

However, some members considered that one function that would no longer be performed would be the provision of advice from a perspective external to the system (i.e. from a body that does not have any operational functions or authority in the occupational health and safety system), which would include input from interests other than management and labour, e.g., technical and professional persons and the public, who are concerned with, and have knowledge of, occupational health and safety. These members stressed the importance of a mechanism to provide such a function, noting that it should be quite separate from the proposed agency, purely advisory, and should not detract from the function, powers or membership of the agency.

Some members noted that, as the system affects employers and workers, these parties should manage the system. If these parties consider that there is a need for public, academic, technical or professional input or expertise, then arrangements for obtaining such input could be made through the appropriate bipartite structure(s).

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* This advice was given prior to the establishment of the Education Authority and prior to the Workers' Centre receiving funding from the Workers' Compensation Board.

Questions and Comments About the Proposed Workplace Health and Safety Agency

- How will the agency interact with government departments, agencies, boards, etc? Is it intended that this be done through the minister? This is particularly important for co-ordinating and integrating the agency's adjudicative and inspection functions with those of the Ministry of Labour, the accreditation function with the Workers' Compensation Board, and in integrating occupational health and safety into the general education system (schools, colleges, universities, etc.).

- Will the agency be responsible for:

  - the funding of such organizations as resource centres? If so, under which section of the Act?

  - the allocation of funds to universities to aid in training occupational health specialists? If so, under which section of the Act?

- Section 10(7)(e) refers only to safety programs. Council stresses the importance of this section also applying to occupational health programs.

- Does equal representation from management and workers 'in respect of the manner in which the association, clinic or training centre is operated' (section 10d) mean equal representation on the board of directors or managing board only or throughout the staff/activities of the organization? How will it be determined that management and workers have equal representation? Does this mean bipartite? Or could they be multipartite as long as there is an equal number of representatives from management and workers? How does representation from 'workers' differ from 'people to represent labour [section 10(1)] and how are they to represent workers? How would these be selected? How would such representatives be paid? Does the agency have flexibility in determining the level of operation that will be required to have equal representation and the nature of this representation? Presumably, the requirement for equal representation would not apply to other associations seeking funding under section 10(7)(e).

- Composition of the agency. Council notes that, unlike the condition for funding associations, etc., i.e. that management and workers have equal representation (in respect of the manner in which the association is operated), the composition of the agency is clearly specified to be six members and a co-chair to represent labour and six members and a co-chair to represent management. In discussion of the issue of bipartite structures and experiences of other jurisdictions, council did not identify any mechanism for getting representation for non-unionized workers. The main problems being how would such 'representatives' be chosen? who would they represent? and how could representation be ensured? Noting that the Act and regulations apply to all workers in Ontario, council stresses the importance of the agency considering the needs of all workers, whether or not they are unionized.

Council stresses the importance of the minister having the ultimate responsibility to ensure that the functions under the Act are fulfilled.

Council recognizes that the agency will have to work out the details for the administration of many of its duties, such as:

In section 10(7)(a-d) re. certification/decertification

- Could non-committee members take training and become certified?
- Would certification need periodic renewal or updating?
- How much of the training would be general to all committee members? and how much would be industry-specific? operation- specific?
- Would certification be transferable from workplace to workplace? from work site to work site? from operation to operation?
- What would be the incentive for workers to become certified?
- How will the activities of certified members be reviewed?
- Will disciplinary action [section 10(7)(d)] be limited to abuse of the right to direct a work stoppage [section 23a(1)] and situations where an investigation of a complaint under Section 23a(2) was carried out improperly, negligently, or in bad faith [section 23c(6) and (7)]?
- Could there be disciplinary action for certified members failing to act or who 'improperly', 'negligently', or in 'bad faith' cancelled directions to stop work?

Council's comments on the agency's powers for taking disciplinary action will be discussed under section 23a.

Council notes that, in order to have a certified member available in a workplace, each committee will have to have more than one worker and one management member certified, e.g., one for each site, and each shift, and back-ups or alternates for vacations, sick leave, etc. Practically, there would need to be a pool of certified individuals.

In section 10(7)(g) re. funding research

Council questions the rationale for including, as a function of the agency, funding of occupational health and safety research. It is recognized that there is a link between education and training and research, and that the safety associations presently undertake some research. It is also recognized that among the functions of the agency is administration of the funds and grants to external bodies for occupational health and safety-related activities. However, the primary mandate of the agency appears to be health and safety education and training for the workplace parties. Concern was expressed that, as certification is a new requirement and will be required for at least two members of every joint health and safety committee in the province, other functions of the agency may not receive the attention, resources and expertise that they deserve. The fact that the research activities of the Ministry of Labour are already fragmented through a number of branches was noted in the McKenzie-Laskin report, and co-ordination was recommended.

If the agency does have the responsibility for administering funds for external occupational health and safety research, it will need to:

- determine a means to ensure the scientific validity and relevance of research, such as whether research proposals would be reviewed by the agency for quality,

relevance, etc./peer reviewed for the scientific validity and appropriateness of the methodology, and/or whether the agency would establish a scientific *advisory* committee to fulfil these functions. Council notes the importance of peer review by outside experts for research and proposals for research, as well as for scientific documents prepared or used by the ministry as the basis for policy or regulation making. In Advisory Memorandum 85-V council recommended that health effects documents and risk assessments prepared by, or for, the ministry be peer reviewed by outside experts (Recommendation 85-18);

- develop criteria for establishing policies for funding and for determining priorities;

- develop guidelines regarding access to data and the use of record linkages (see ACOHOS Recommendation 80-38).

Council considers it to be of fundamental importance that, however the occupational health and safety research is co-ordinated, administered and funded, there be a mechanism for ensuring the quality and relevance of research to occupational health and safety and that research receives adequate attention and resources.

In section 10(7)(h) re. accreditation:

- What does operating 'successful health and safety programs and policies' mean? How would it be determined? based on what data? from whom?

- Would it involve inspection functions? If so, how would these inspections fit in with those performed by the ministry and the Workers' Compensation Board?

- Would there be the opportunity for input into the process for developing criteria?

- What does accreditation mean to a company?

  - Changes in WCB assessments?

  - Changes in inspection frequency?

  - If accreditation were revoked, would a company have a different status from one that had not yet been considered for accreditation?

Section 10c (transfer of funds)

It appears that the budget for the agency would consist of the money that is presently going to safety associations from the Workers' Compensation Board, plus that presently going to clinics, research grants, etc., from the ministry. As the functions for the agency prescribed in the amendments go far beyond those presently being funded, it is assumed that the agency will have to *commence* by redeploying these funds or by finding means of employing the funds more effectively.

There will be the need to identify the funds needed for the internal administration of the agency, for funding associations, clinics and training centres as prescribed, and for funding and grants to other institutions and for research [section 10(7)(e) and (g)].

As noted earlier [see section 10(7)(g) funding research], there will be a need for criteria for allocating funds, and it is considered important that these be public.

Council stresses the importance of all of the agency's functions: education and training of all workplace parties, promotion of public awareness, funding research and funding associations, clinics and centres that provide support services to workers and employers. These functions are particularly important for workers and employers in small workplaces as they are less likely to have internal 'supports'. Although the issue of small business is being considered by a task force of council and will be the subject of separate advice, council stresses the need for the agency to consider the special needs of small business and to ensure that there are adequate resources available and devoted to helping to address these needs.

Section 14(2)(i) (duty of employer to have a policy and procedures)

The requirement for employers to prepare a policy and develop and maintain a program to implement that policy is consistent with council's advice in Advisory Memoranda 85-IV and 88-I. However, as well as containing details and essential components of workplace occupational health and safety policies and programs, council's advice stressed the importance of the involvement of joint health and safety committees and the need for guidelines. Council believes that the development of guidelines, as well as helping companies establish and maintain policies and programs, could aid the agency in determining criteria for accreditation.

ACOHOS RECOMMENDATION 89-12

> that the proposed section 14(2)(i) be modified to include the requirement for the joint health and safety committee or the health and safety representative to be involved in the preparation and review of the policy and of the program to implement the policy.

Section 15(3) (payment for medical surveillance)

In Advisory Memorandum 87-III council recommended that employers be required to offer, and pay for, health surveillance programs demonstrated to be a precaution reasonable in the circumstances for the protection of a worker and where there are valid and effective tests (ACOHOS Recommendation 87-10). On the assumption that medical surveillance programs will be prescribed only when they meet the criteria identified in the recommendation, the amendment is consistent with council's advice.

Section 17(1)(e) (repealing the requirement for a worker to have medical examinations as prescribed)

In Advisory Memorandum 87-VI council recommended that worker participation in medical surveillance be mandated only in circumstances where the surveillance would identify a medical condition that would prevent a worker from performing his or her job safely, thereby causing a significant risk to the health or safety of the public or other workers *and* where there are valid and effective procedures to make such a determination. (ACOHOS Recommendation 87-9)

Council notes that, as well as removing the requirement for mandatory worker participation in medical surveillance programs, repealing this subsection would also repeal the enabling legislation for medical examinations required in any regulation made under the *Occupational Health and Safety Act*, including those to determine

whether a worker is fit to perform a job that could put others at risk, e.g., examinations for hoist and crane operators under the Mining Regulation.

Other regulations, such as the Designated Substance Regulation for Arsenic and Ontario Regulation 654/86, also contain a requirement for workers, under specified conditions, to undergo medical examinations and clinical tests 'to determine whether the worker has an occupational illness because of an exposure and whether the worker is fit ... to continue working in such an exposure.' Council recommended that such 'post-exposure medical examinations' should not be mandated (Advisory Memorandum 87-V, ACOHOS Recommendation 87-8). Council stresses the importance of distinguishing types and purposes of medical examinations and recommends that, rather than repealing the enabling legislation, the regulations should be amended where appropriate.

ACOHOS RECOMMENDATION 89-13

> that section 17(1)(e) not be repealed, but that the regulations requiring employees to undergo medical surveillance or post-exposure medical examinations be modified so that worker participation is not mandatory unless both the criteria identified by council in ACOHOS Recommendation 87-9 are met.

Section 18a (duty of project owners)

Council discussed the importance of project owners preparing a list of designated substances present at the site and endorsed the approach in Regulation 654/85, Asbestos on Construction Projects and in Buildings and Repair Operations. ACOHOS Recommendation 86-4 stressed the importance of employers' responsibility 'to protect the health of all workers at the workplace, whether employed by those employers or not ....'

Section 21

In Advisory Memorandum 88-I, council referred to its previous advice regarding amendments of this section, which deals with introduction of new agents. It is noted that these concerns are not addressed in Bill 208. Council reiterates the need to require notification of the intent to introduce new agents to the workplace as early as possible and for the section to include explicit provision of power to the minister to delay, prohibit or control the introduction of a new agent if he considers that more data are required or that the agent is likely to pose a hazard to the health of workers.

It is also noted that unless section 21 is amended, the Act will not provide the enabling clause required for immediate control or possible regulation in the future for agents, products and processes of biotechnology. (See Advisory Memorandum 87-I.)

Council also questions the deletion of 'or combination of such agents' in sections 21(1) and (2). It would appear that the 'such' applies to new agents, which should, therefore, require notification.

Section 22g(2) (consultation in developing instruction and training programs)

Concern has been expressed about the interpretation of (or disregard for) the requirement for consultation in section 22g(2). Council recognizes that the ministry has used several interpretations and suggests that, to avoid further potential for misinterpretation, 'consultation' be defined in section 1 of the Act. Council refers to a dictionary definition of 'consult': '1) seek information or advice from; refer to, 2) exchange ideas; talk things over, 3) take into consideration; have regard for' and considers that the process of consultation should include certain basic elements such as the provision of information, the opportunity to respond, interaction and involvement.

Council also notes the importance of guidelines that are reviewed by management and labour and widely circulated, and of enforcing the requirement for consultation.

Section 23 (right to refuse where health or safety are in danger)

In Advisory Memorandum 88-I, council stressed the importance of the rights and responsibilities enshrined in the Act applying to all, noting that the right to refuse is a fundamental right that should apply to all workers as should the qualifications that limit that right.

Bill 208 does not address this issue and, in fact, extends the exemptions so that a direction to stop work may not be given in workplaces listed in section 23(1), or (2) if the life, health or safety of any person or the public may be in imminent jeopardy. It is recognized that in the occupations and institutions listed in these subsections, there are two types of situation where work may endanger a worker or a fellow worker, i.e. situations where a refusal to work could endanger the life, health or safety of another person or the public and those that, in some circumstances, would not (such as flaking asbestos in an office of a police station). Council considers that work refusals are inappropriate for the former situations; however, it considers that all workers should have the same rights to refuse and refers to ACOHOS Recommendation 88-10:

> that the Act be simplified so that a worker may refuse any work activity where he or she has reasonable grounds to believe that his or her health or safety or the health or safety of another person is likely to be endangered by that work except in situations where the health or safety of another person or the public are likely to be endangered by the refusal.

If, however, there continue to be exemptions from the right to refuse, then there should be some alternative mechanism for such workers to deal with imminent hazards.

ACOHOS RECOMMENDATION 89-14

> that, if there continue to be exemptions from the right to refuse, there be included in the Act a mechanism to allow workers to deal quickly and effectively with conditions that endanger their health or safety or the health or safety of others.

Concern was expressed that section 23(2) can be (and indeed has been) interpreted as a blanket exemption for persons employed in the operation of the institutions listed.

This is probably due to the difficulty of deciding whether the life, health or safety of another person or the public may be in imminent jeopardy.

Council queries whether sections 23(1) and (2) are in violation of section 15 of the *Charter of Rights*, especially in light of the recent decision that changed the interpretation of the equality test under the Charter.

Council also notes that Bill 208, unlike Bill 106, does *not* prohibit the assignment of the work being investigated to another worker.

In discussion of this issue, a number of points were noted:

- the effect of prohibiting reassignment could be enormous in certain line-production industries; hence, there is concern about the consequences of an abuse of the right;
- the employer would have no way of preventing such a potential abuse; and
- a worker could not be punished for an abuse of the right;
- if the worker's concern were legitimate, other assigned worker(s) could also refuse or, if Bill 208 passes, a certified member could direct the work to stop;
- if another worker can be assigned the job there might be less incentive for an employer to take the concern seriously and address the problem; and
- there will be a strong disincentive for a worker to refuse, especially in short-term contract-type work;
- other workers affected by the refusal would not get paid during the time that there is no work as a result of a work refusal. Hence, there will be considerable peer pressure for a worker not to refuse;
- no data has been presented to indicate that the right to refuse has been abused.

Section 23(3)(ba)

It is noted that the definition of 'work activity' is not clear; nor is it clear whether it would include, for example, such activities as 'non-manual' labour (e.g. pushing buttons), repetitive actions, or stress.

While endorsing the concept of including hazardous work activities in this subsection, concern was expressed about how this provision would be interpreted at the work site and who would have the expertise to determine whether the activity would be likely to endanger a worker or another worker. The importance of, and need for, distinguishing between the elements of the work activity that are inherent in the work and those that are dependent on the individual reactions and responses of a specific worker to the work activity was stressed.

Council suggests that guidelines be developed to aid in determining the definition of work activities and in distinguishing between the activity and the degree to which workers' responses are subject to individual variation.

Section 23(13) (entitlement to be paid)

Council notes that the requirement proposed in Bill 208 for an employer to pay *the* worker during the first stage of a work refusal is in marked contrast to the provision proposed in Bill 106 (as section 31a), which would have required the employer to pay all workers not less than 75 per cent of their pay for the period there is no work for the workers because of a work refusal under section 23 or because of an inspector's order under section 29(4).

Section 23a (certified member *may* require work stoppage)

Council was unable to come to consensus on this proposed amendment.

Several questions were raised and points noted, including the following:

- It appears that the wording of section 23a(1)(c) would preclude any work stoppage as it would be virtually impossible for a certified joint health and safety committee member to *know* in advance that 'any delay in controlling a danger or hazard *will* cause serious risk to a worker.' Council observes that for the individual right to refuse [section 23(3)], the worker needs to have 'reason to believe' and, following an investigation [section 23(4)], if 'the worker has reasonable grounds to believe' that his health or safety are likely to be endangered, he is entitled to continue to refuse. These forms of wording represent a range in the degree of certainty needed before a worker can legally exercise the right. It was suggested that the right of a certified member (in section 23a) should be within the same range of certainty and be consistent with section 23.

- If the three conditions (a) (b) and (c) [in section 23a(1)] are all fulfilled, it was felt by some members that it should be the duty of all certified members to direct the work to stop rather than a matter that is left to the discretion of the member. (See the earlier comment regarding the duty/responsibility of a member to inform the committee of a situation that may be a source of danger.)

In discussing the potential for abuse that this section could encourage, a number of observations were made and questions raised:

1) What are the advantages to a worker of certification? Would these make decertification a serious disincentive? Would the disincentive be sufficient to avoid abuse?

2) Employers are not required by the proposed legislation to pay workers other than the certified member while carrying out his or her duties under sections 23a and 23b during a work stoppage.

3) Could this (lack of payment) be construed as the employer penalizing a worker for not working when it is found that a provision of the Act or regulations is being contravened and it will cause a serious risk to the worker? [i.e. could this be considered a violation of section 24(1)(c)?]

4) Would a worker have the right to continue to work after there has been a direction to stop work, i.e. if a contravention has been found and a worker has the duty to work in compliance with the provisions of the Act and regulations [section 17(1)(a)]?

5) Subsection 23a(6) as currently drafted in Bill 208 implies that, if a worker member directed a work stoppage, a management member could cancel it.

6) Workplaces with fewer than 20 workers without committees will not have certified members, so sections 23a-c will not app[illegible].

7) Could a certified worker be subject to civil liability if his or her direction to stop work were considered to be an action in bad faith?*

Council is left in a quandary about the relative value of the potential for good that can be achieved by a certified worker member directing unsafe work to stop versus the disruptions in work for entire workplaces and the potential for economic losses that could result from abuse or misuse of this provision.

Section 23a(6) (work to resume)

It is understood that in some cases it may be difficult to contact the certified member who initiated the direction to stop work. However, council considers that if a certified worker member initiated the direction to stop work and that member cannot be contacted, only another certified *worker* member should be able tocancel the direction to stop work. Similarly, only another certified management member should be able to cancel the direction if the management member who initiated the action cannot be contacted.

Section 23a(7) (restrictions re directions to stop work)

As noted earlier, council considers that limitations to rights should be the same for all certified workers (see also ACOHOS Recommendation 88-10). If such specific exemptions are retained, the agency will need to consider carefully criteria for determining how a certified member can decide whether life, health or safety of any person may be in imminent jeopardy.

Section 26(2) (notice of occupational illness)

Concern has been expressed at the negative consequences that could result to a worker from notifying the joint health and safety committee of a claim for occupational illness being filed with the Workers' Compensation Board. In Advisory Memorandum 88-I council recommended that such notification should only be made with the informed consent of the worker. (See ACOHOS Recommendation 88-12.)

Section 28b(1) (seizure of documents or things)

It was noted that seizure and removal of documents from the workplace, and the potential for such documents to be away from the workplace for three months, could cause problems for companies, especially in preparing WCB claims and/or collecting data relevant for defence of a prosecution, etc. It is suggested that provision be made for a copy of the records, etc., to be obtained by, or retained at, the workplace.

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* This was an referred to by G.R. Thompson, Deputy Minister of Labour, in a public address to the Ontario Road Builders' Association (March 30, 1989). Noting this interpretation, council questions the application of section 36.

Section 29(4a) (resumption of work pending inspection)

The question was raised as to whether or not the same procedure would be required for the resumption of work pending an inspection if the contravenors were workers, e.g., if there were a stop-work order because workers were not wearing/using protective equipment.

Section 34(1a) (employer access to health records)

Council notes the importance of obtaining the written consent of a worker before an employer can gain access to a worker's health record and stresses the need for workers to understand what the consent means.

ACOHOS RECOMMENDATION 89-15

that the proposed amendment, Section 34(1a), be modified to specify that the consent required for access should be 'informed' and that it be required each time an employer seeks access to a worker's health record.

Ontario Ministry of Labour
Ministère du Travail de l'Ontario

Office of the Minister
Bureau du Ministre

400 University Avenue
Toronto, Ontario
M7A 1T7
416/965-4101

September 15, 1989

Dr. J. Barling
Chairman
Advisory Council on Occupational Health
and Occupational Safety
11th Floor
400 University Avenue
Toronto, Ontario
M7A 1T7

Dear Dr. Barling:

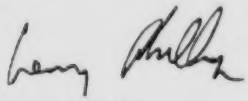
I know that the Advisory Council is interested in the future of the proposed amendments to the Occupational Health and Safety Act (the Act). Let me take this opportunity to inform you on the present status of this initiative.

As the new Chairman of the Advisory Council on Occupational Health and Occupational Safety, you appreciate the huge challenge that faces all of us in attempting to reduce the burden of injury and illness to the workers, workplaces and employers in this province. The government introduced Bill 208 for this very reason.

I believe that the general thrust of this initative is a positive one. Bill 208 represents an evolution in occupational health and safety towards a system which is based on the cooperative efforts of business and labour and which concentrates on raising the level of workers' training and awareness. In this respect, it appears to more effectively address control of risks in the workplace.

As the new Minister of Labour, I want to better familiarize myself with the proposed amendments and the concerns raised in reaction to them. Following this it is my expectation that the Legislative Assembly will consider amendments to the Act during the coming legislative session.

Yours sincerely,



Gerry Phillips
Minister

Ontario

Advisory Council on Occupational Health & Occupational Safety

Conseil consultatif sur la santé et la sécurité au travail

Office of the Chairman

Bureau du président

400 University Ave. Toronto, Ontario M7A 1T7
416/965-2448

400, avenue University Toronto (Ontario) M7A 1T7
416/965-2448

January 23, 1990

The Honourable Gerry Phillips
Minister of Labour
400 University Avenue, 14th Floor
Toronto, Ontario
M7A 1T7

Dear Mr. Phillips:

Council has received a number of requests for copies of its advisory memoranda dealing with Bill 208 and small business. As there is presently extensive public discussion of these issues, we believe that it would be useful to make Advisory Memoranda 89-I and 89-II available to the public now.

While your detailed response is pending, I am requesting that you approve immediate release of these advisory memoranda so that consideration of the ideas, principles and recommendations contained therein can contribute to public discussion in a timely manner.

I would appreciate hearing your decision on this matter immediately so that we can respond to requests appropriately.

Yours truly,

Julian Barling
Chairman

c.c.: G. Thomson
T. Millard

Ontario Ministry of Labour
Ministère du Travail de l'Ontario

Office of the Minister
Bureau du Ministre

400 University Ave.
Toronto, Ontario
M7A 1T7
416 965-4101

400, avenue Univers
Toronto (Ontario)
M7A 1T7
416 965-4101

February 2, 1990

Dr. Julian Barling
Chairman
Advisory Council on Occupational Health
and Occupational Safety
11th Floor, 400 University Avenue
Toronto, Ontario
M7A 1T7

Dear Dr. Barling:

Thank you for your letter dated January 23, 1990, concerning Advisory Memoranda 89-I and 89-II. In view of the interest in the subject matter of these documents, I agree that there is good reason to release them now rather than waiting until I have responded more formally to the recommendations.

In light of this, I approve of your plan for immediate release of these advisory memoranda.

Yours sincerely,

Gerry Phillips
Minister

Advisory Memorandum 89-II

Ontario

Advisory Council on Occupational Health & Occupational Safety

Conseil consultatif sur la santé et la sécurité au travail

Office of the Chairman

Bureau du président

400 University Ave
Toronto, Ontario
M7A 1T7
416/965-2448

400, avenue Uni
Toronto (Ontario
M7A 1T7
416/965-2448

November 28, 1989

The Honourable Gerry Phillips
Minister of Labour
400 University Avenue
14th Floor
Toronto, Ontario
M7A 1T7

Dear Mr. Phillips:

On behalf of council it gives me pleasure to submit Advisory Memorandum 89-II: Concerning Small Business.

In 1987 council established a task force to recommend strategies to deal with the problems of health and safety in small workplaces. During consideration of the various aspects of the problems, it was realized that no one strategy nor single organization, alone, could meet the occupational health and safety needs of all workers and employers. Accordingly, council developed a framework consisting of a number of interlinking strategies.

Council recognizes the difficulties of dealing with numerous, diverse, small workplaces. It also realizes that the ministry and other organizations and associations are attempting to deal with the problems and to reach small businesses with health and safety information and services.

We believe our advisory memorandum will be useful in helping workplace parties achieve a healthy and safe work environment.

Yours truly,

Julian Barling

Julian Barling
Chairman

Encls.

c.c: G. Thomson
T. Millard

Advisory Memorandum 89-II to the Minister of Labour November 28, 1989

Concerning Small Business

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BACKGROUND

In discussing occupational health and safety in Ontario workplaces, council has frequently been reminded of the difficulties faced by small businesses.

In 1987 council established a task force to consider the issues facing small business and to recommend strategies and means of implementing strategies to deal with the problems of health and safety in small workplaces. (See Appendix I for the terms of reference and membership of the task force).

The task force discussed the present system, reviewed data regarding levels of health and safety in small, compared to large, workplaces and attempted to identify factors that may cause occupational health and safety conditions to differ between small and large workplaces. A number of individuals from a variety of organizations and associations were invited to meet with the task force to describe their activities, how occupational health and safety fits into what they do, their perceptions of health and safety needs, and their suggestions and approaches for addressing the needs. (Appendix II contains a list of the guests and their affiliations.)

In this document there is a brief outline of the approach, assumptions and principles that were used by the task force, and a description of a number of strategies council recommends for helping to deal with occupational health and safety in small workplaces.

INTRODUCTION

Seventy-four percent of businesses in Ontario employ fewer than five employees (Appendix IIIa) and an estimated 30 percent of the paid work force of Ontario's businesses is employed by firms with fewer than 50 employees (Appendix IIIb). Small businesses are found in a wide range of industries and are particularly common in farming, construction and forest products industries. Their presence in relatively 'high hazard' industries has been noted[1], as have their numerous health and safety needs, e.g. those related to noise, dust and chemical exposure control[2,3,4]. It is widely believed by providers of occupational health services that many small businesses have limited resources for ensuring health and safety in their workplaces. Individuals who work in small businesses are often seen to lack knowledge of hazards and their prevention, to be unaware of legal rights and obligations with respect to health and safety, and to have inadequate financial and manpower resources to manage health and safety concerns[1,3,5,6]. In addition, in terms of the provision of health and safety services and support, it is generally recognized that both the owner/managers and employees of small businesses are often 'hard to reach'.

Before identifying particular occupational health and safety issues in small business settings and strategies for change, it is useful to consider certain general characteristics of small businesses and their possible implications for occupational health and safety.

Nature of Small Businesses

Small businesses vary in nature from owner-/family-operated shops to franchise operations to relatively large capital-intensive companies employing few workers where the owner/manager may or may not work at the site.

Some small business owners strive for growth and development of their companies while others see their businesses more just as a way to make a living. Many small business owners have invested a great deal of their own money in their businesses. The failure rate of new businesses is high, and financial precariousness remains a problem for many establishments throughout their histories. Many owners also put in long working hours and have little, if any, managerial back-up. They often find themselves tied to their businesses in ironic contrast to the independence so many seek in becoming their 'own boss'[7]. Owners in many small businesses fulfil most, if not all, management functions themselves, including sales, finance, production and personnel. In addition, in the very small establishments owners may work alongside their employees on the shop floor. With such heavy demands on their time, owners are often preoccupied with the daily tasks of running the business and may have little energy left for anything but the most immediate and pressing matters.

As a significant source of new jobs (see Appendix IIIc), small businesses are often the point of entry into the labour market for employees who are young and inexperienced. Often, employees include recent immigrants who may not speak English and who may have diverse cultural expectations regarding work. Frequently, family members are involved in the business.

Limited financial resources and fluctuations in work flow are not uncommon and many small businesses subcontract parts of the job and hire workers on a part-time basis. Skilled and experienced employees are often key to the ongoing functioning of the company and many owners put priority on retaining them. Employees, like owners, often perform multiple diverse tasks ('a little bit of everything'). Because many small businesses engage in work at multiple, scattered worksites that may belong to a customer (e.g. floor laying or electrical contracting), employees often work alone or in very small groups, and have little supervision. Relatively few small business employees are members of a union.

Implications for Occupational Health and Safety

Many aspects of small business life have potential implications for occupational health and safety. For example, if owners work alongside their employees, they may be more aware of the hazards and discomforts of the work. At the same time, however, proximity to their employees may, at times, make it difficult for some owners to ensure certain health practices are followed, particularly when those practices are not popular (such as wearing masks). Yet structural approaches to prevention (such as installing a ventilation system) may not be considered feasible for financial reasons.

Work that involves 'a little bit of everything' may prevent owners from focusing on health issues, tends to make occupational health and safety training more difficult and may discourage employees from using certain personal protective devices (e.g. bothering to put on a mask for brief periods). Scattered worksites that involve work on someone else's premises may mean that owners and workers have limited control over potentially hazardous working conditions (e.g. dangerous loading docks that belong to the customer). Fluctuating work volume and staff turnover may make it difficult for owners to ensure that employees are appropriately trained, both in the job and in occupational health and safety, and could prevent employees from sustaining effective involvements in such activities as joint health and safety committees. An unorganized and culturally diverse work force may mean that employees have less access to occupational health information and less social support in exercising their rights and

obligations. Such a work force may also place a heavy onus for health and safety on the owners and present formidable obstacles to education and training.

As many aspects of the work-setting and social organization of small businesses have possible implications for occupational health and safety, they need to be taken into account in developing strategies aimed at improving health and safety conditions in such workplaces.

APPROACH

The task force gathered, discussed and analysed a broad range of background information on health and safety in small business and on agencies/organizations that offer services. This section sets out principles and some brief comments on the background information that helped determine the assumptions and approach.

Basic Principles

- the basis of all strategies should be prevention;
- occupational health and safety is one facet of overall health, safety, work and the environment and it should be considered/ incorporated into the design, planning and performance of work and equipment (it is an integral and essential part of an efficient, effective operation);
- legislation and regulations specifying occupational health and safety standards, duties, rights and responsibilities should apply to all employers and employees in all workplaces, regardless of size;
- to be effective, legislation and regulations need to be known, the application understood, and compliance with the provisions has to be practical, feasible, enforceable and enforced, regardless of size.

Background Information

The task force's consideration of background information and its review and analysis of current policies and initiatives focused on how small businesses 'fit into' the present system for occupational health and safety in Ontario.

There have been various studies conducted to determine whether levels of health and safety differ between large and small workplaces. The task force reviewed several such studies. It also analysed data from council's survey of joint health and safety committees and Workers' Compensation Board data on lost-time injuries by size (person years) and by industry type. The task force found that the data are often contradictory and difficult to interpret and assess. There is no clear-cut evidence that health outcomes differ with size across industry types. Interpretation of the data was complicated by variations in industry type, in patterns of distribution of size within and between industries and in the definitions of 'small' that were used and by varying attempts to rule out other contributing factors.

Recognizing that many of the problems faced by small business would differ from those facing large, the task force decided that, rather than trying to prove that there are differences between the rates or nature of occupational accidents and illnesses in small and large workplaces, it would base its approach on the general need to improve health and safety in the workplace, regardless of size.

Initially, it was anticipated that consideration of factors that could cause occupational health and safety *conditions* to differ between small and large would help to identify the 'problems' or difficulties experienced in small workplaces and strategies for dealing with them. As both employers and workers have rights and responsibilities for occupational health and safety, it was considered important that the difficulties experienced both by workers and owners/managers be considered.

In the process of attempting to identify problems/factors, it was recognized that generalizations have to be made and that no factor would be common to all small workplaces nor would any be a problem only in small workplaces. Each of the factors will, at best, show a gradation from 'less likely' to 'more likely', depending on size.

It also became apparent to the task force that the attempts to identify 'problems' tended to be integrally linked to anticipated solutions and difficulties that small businesses may have with implementation; e.g. 'small businesses are *hard to reach*; therefore, strategies are needed to reach out to them.' The question then becomes: Is 'being reached' and having information all that is needed to alter the conditions of occupational health and safety in the workplace? For instance, if managers/owners who did not have occupational health and safety programs were made aware of the need to implement such programs, would they consider them a priority? What incentives would owners have to implement programs? Would they have the resources and necessary support to do so? Would the workers get the information? And would they have the support necessary to participate in the programs?

There was also difficulty distinguishing between *known* differences between small and large workplaces that may or may not influence occupational health and safety conditions and factors thought to affect occupational health and safety conditions but that are only suspected as being different as between small and large workplaces. For this reason the task force began by considering known differences between large and small and attempted to identify how these may either alter the occupational health and safety conditions in the workplace or create difficulties for the workplace parties in implementing occupational health and safety programs and/or improving occupational health and safety.

The distinguishing feature between small and large is usually taken to be the number of workers. Accordingly, there are certain 'known' differences such as fewer workers at each workplace and, therefore, fewer people 'managing' or in charge at each workplace (although the ratio of people managing to workers may be greater than, less than or the same as in large workplaces). A possible implication of this is that each person managing will have to perform a greater variety of duties. For instance, in places with 10 or fewer workers there may be only one person in charge, who has to perform a wide variety of functions, e.g. hire and fire workers; supervise the work; ensure quality control; and manage finances, paperwork, insurance, workers' compensation, property and equipment maintenance, and occupational health and safety. Although any of these alone may be less demanding in a small workplace with fewer workers, the person managing would have less time to devote to each task. It would seem likely that, in many cases, with the day-to-day problems of running a business and keeping it profitable, occupational health and safety would not be a priority item. With all their other responsibilities and commitments, the people in charge would be less able to leave the workplace for occupational health and safety training and seminars, etc. and would tend to be less likely to be members of, or involved in, associations' health and safety activities.

Small workplaces will often have fewer resources for each workplace and the cost of installing or introducing engineering controls, new or safer machines or new technologies will often be proportionately greater (per worker). Fewer workers in each workplace would mean that the workers would have fewer peers to learn from and less in-house occupational health and safety expertise, therefore, hence, the workers are less likely to receive either formal or informal health and safety training.

Experience with occupational accidents or illnesses tends to increase awareness of occupational health and safety and when there are fewer workers at a workplace, there will be less experience with injuries or illnesses. This is not to imply that the rates of accidents or injuries are different between small and large workplaces, only that, with fewer workers at each workplace, there will be fewer total accidents or illnesses at a particular workplace and, therefore, awareness of occupational health and safety issues at the workplace could be lower.

Workers in small workplaces are less likely to be unionized. The effects of unionization will vary, but possible implications of workers not being unionized are that they are less likely to be aware of occupational health and safety issues, and access to information is likely to be more difficult. Non-union workers are less likely to be aware of their rights and responsibilities under the Act, less likely to have collective agreements (occupational health and safety issues are often included in collective agreements) and less likely to have support if they exercise (or consider exercising) their rights.

Because of the large number of small workplaces (see Appendix IIIa), they will be more difficult to reach with information, services, inspections, etc.

The characteristics of small business described in the Introduction and the differences identified above are often cited as reasons small businesses have more difficulty implementing health and safety in the workplace (or reasons small business needs special attention). The task force recognized, however, that there are few data, if any, examining whether these factors directly affect health and safety conditions.

Because the task force realized that problems are multifaceted and interrelated and will not be the same for all 'small' businesses, it decided not to focus on identifying and analysing specific factors/problems. Also, because the areas of concern associated with 'small' do not appear to be restricted to differences in size, but are also associated with differences in management structure, nature of industry and a variety of other factors, the task force decided not to 'define' small.

Assumptions

- improvements are needed in health and safety conditions in workplaces, regardless of size;
- although the legislation and goal for a healthy, safe work environment should be the same for all workplaces, strategies for protecting health and safety will not be the same;
- the size, structure, organization and nature of workplaces will all influence the type of strategies that will be most effective in achieving the goal;
- because there is no one common problem, there will not be one common solution. Problems and solutions are multifaceted, and many aspects are interrelated and interdependent.

THE PRESENT SYSTEM

Central to the present system for dealing with the protection of health and safety in the workplace are the rights and responsibilities of employers and workers. Although the goal for a healthy, safe work environment is the same for all workplaces and for all workplace parties, employers and workers have different roles within the workplace. Their rights and responsibilities are quite distinct, as are their interests, priorities and reasons for working towards the goal. In its consideration of the system the task force reviewed the arrangements that are made to ensure that rights and responsibilities are fulfilled, recognizing that the employers and workers will often have different needs and difficulties.

The present system operates within a framework of government policies, legislation and regulations, and the government is responsible for developing these and enforcing compliance with the provisions and standards that are set. Numerous organizations are available to aid workplace parties in fulfilling their rights and responsibilities and in complying with legal standards. These organizations provide sources of information, technical services and other support functions to employers and/or workers. The extent of their availability and accessibility to workers or employers varies tremendously and can be affected by size, nature and location of workplaces.

The Occupational Health and Safety Act sets out legal rights and responsibilities for workplace parties and the requirements for workplaces with more than 20 workers to have a joint health and safety committee to oversee, inspect and investigate certain occupational health and safety issues. It also provides enabling legislation for regulations that contain legal standards and gives powers to Ministry of Labour inspectors to enforce the provisions of the Act and regulations.

An essential assumption of legislation is that people will comply with it and that compliance will help achieve the goal intended. However, it is recognized that not everyone will be in compliance. Therefore, the challenge for the task force was to identify and recommend strategies that would facilitate compliance in small workplaces where the legislation is likely to be less well known and understood and where compliance may be more difficult.

One explicit *difference* in the application of the Act, based on size, is that workplaces with fewer than 20 workers regularly employed are exempt from the requirement to have joint health and safety committees. Also, differences in owner-/manager-worker interaction, management structure and degree of unionization may affect the dynamics of labour relations, the distinctions between roles and, therefore, the application of rights and responsibilities. The need for balance between the rights of employers and workers is fundamental to the present system, and the role of the joint health and safety committee is considered an important mechanism for the parties to together oversee the system.

Council recommended that there should be no all-encompassing exemptions or exceptions, either from the application of the Act or any of its major provisions (ACOHOS Recommendation 88-3). It recognized that joint health and safety committees are not feasible in very small workplaces and recommended that all workplaces that did not have committees be required to have a worker health and

safety representative (ACOHOS Recommendation 88-4)*. Bill 208, *An Act to Amend the Occupational Health and Safety Act and the Workers' Compensation Act*, partially addresses this issue. The proposed amendments would require a health and safety representative in all workplaces not required to have a joint health and safety committee where five or more workers are regularly employed.

Organizations, agencies and other supports are essential components of the system. The task force collected background information on and invited individuals from a variety of such agencies, associations, institutions and government departments. A summary of this information is appended (Appendix IV). The task force's comments on this review have been incorporated into the section of this document dealing with support services.

AREAS NEEDING SPECIAL ATTENTION

Following its examination of the present system, the task force concluded that, to make the system more effective, it is necessary to incorporate health and safety into all aspects of work and to ensure that the workplace parties are aware of and understand their rights and responsibilities under the Act and have the tools and support they need to exercise their rights and fulfil their responsibilities. These were considered important needs for all workplaces.

A major concern identified by the task force was that many small workplaces do not have effective arrangements for protection of health and safety and, due to difficulties of access and shortage of resources, the workplace parties are not able to effectively utilize the present system. The task force identified four areas where small workplaces need special attention:

1) awareness;
2) education and training at all levels of the educational system;
3) support for both workers and management to help them exercise their rights and fulfil their responsibilities;
4) enforcement of the Act and regulations to ensure that legal standards are met and that parties fulfil their responsibilities.

In its consideration of each of these areas, the task force looked at the present system (i.e. the allocation of responsibilities between workplace parties, what is currently available and sources of funding) and recommended strategies to help make the present system more effective.

Council notes that none of the strategies listed will, alone, be sufficient. They may be directed or applicable only to workers or owners or some workplaces. The strategies in the different areas are interrelated and interdependent, i.e., raising awareness is an essential first step, but without the training and/or support to be able to take appropriate action, awareness of health and safety issues will not improve conditions in the workplace.

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* that, unless otherwise prescribed, all workplaces in which the number of employees does not exceed ten be required to have a worker health and safety representative; and that, unless otherwise prescribed, all workplaces in which the number of employees regularly exceeds ten be required to have joint health and safety committees with two co-chairpersons: one representing management and one representing workers.

It was also considered important to recognize that there will be times when the needs of workers will be not only different from but in conflict with the needs of owners/managers and that there will have to be a mechanism to ensure that eachworkplace party can be provided with what he or she needs to play an effective role in protection of health and safety in the workplace.

1. Awareness

Responsibility and Present Practice for Increasing Awareness

For occupational health and safety, awareness can be considered in three broad overlapping categories:

1) general awareness of health and safety that should be integrated into all activities, including work;
2) awareness of specific occupational health and safety issues that will apply in particular workplaces and occupations;
3) awareness of the Act and regulations and of responsibilities and rights to take action for protection of health and safety in the workplace.

Citizens have a responsibility to be aware of and comply with the laws applying to them, and government responsibility for ensuring compliance and enforcing laws. Customarily, governments also promote awareness of the laws and various means of complying.

In the present system promotion of awareness of occupational health and safety has been done through a variety of organizations, funded through a variety of sources, including the Ministry of Labour (general revenue), safety associations (Workers' Compensation Board), unions (union dues from members), trade associations (employers) and various community groups with funding from a variety of sources. Generally, awareness is promoted by way of the media and circulation of pamphlets.

Strategies to Increase Awareness

Recently, there have been a number of reports to government dealing with the importance of health promotion and emphasizing the need for preventative strategies, [e.g. the Evans (Ontario Health Review Panel) and Spasoff (Panel on Health Goals for Ontario) reports and The Premier's Council on Health Strategy]. The Premier's Council on Health Strategy recommended five health goals for Ontario, which included shifting the emphasis to health promotion and disease prevention, fostering strong and supportive families and communities, and ensuring safe, high quality physical environment. It notes that 'Communities are ready to be partners in improving health' ... *and* that ... 'There is interest in improving the quality of working conditions and productivity by employees and by employers.'

Council notes that the general public's awareness of the effects of life styles and the environment on health has increased at a faster pace than their awareness of the impact of the work environment on health. Council considers that a safe, healthy work environment is an essential component of the wellness movement.

Therefore, council recommends:

ACOHOS RECOMMENDATION 89-16

that the Minister of Labour take the steps necessary to promote public awareness of health and safety in the work environment. In so doing, all possible channels should be used and the messages should be simple and easily understood, regardless of language and literacy levels or cultural and ethnic differences.

Council considers that changes in public awareness will change attitudes, alter peer pressures and help incorporate consideration of health and safety into all of life's activities.*

In addition, and of specific importance for reaching workplace parties in small workplaces, council recommends:

ACOHOS RECOMMENDATION 89-17

that the Minister of Labour ensure that there are specific strategies to raise awareness of occupational health and safety issues and the Act and its provisions, targetted at workers and owner/managers in small workplaces and people preparing to enter the work force.

As a means of increasing awareness, council recommends:

ACOHOS RECOMMENDATION 89-18

that the Minister of Labour establish a mechanism for co-operating with the Workers' Compensation Board and various associations and organizations that have contact with small businesses to promote the incorporation of health and safety information into information packages, newsletters, etc. disseminated by them.

It is considered important that the initial information to newly-established businesses be simple and that it emphasize the importance of health and safety, the existence of the Act, and the fact that both workers and employers have rights and responsibilities with respect to occupational health and safety. It should clearly list contacts and sources of information and it could contain industry-specific information, where appropriate.

ACOHOS RECOMMENDATION 89-19

that the Minister of Labour liaise with associations and institutions responsible for registering, licensing and/or certifying businesses or personnel, for the purpose of promoting the incorporation of health and safety awareness into their operations and into information they provide to registrants.

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* The importance of this was also discussed in the Introduction to council's 11th Annual Report.

2. Education and Training

Responsibility and Present Practice

Employers are responsible for: providing information, instruction and supervision to a worker to protect the health and safety of the worker [section 14(2)(a)], acquainting a worker with any hazard in the work [section 14(2)(c)], and ensuring that a worker exposed or likely to be exposed to a hazardous material receives, and participates in, such instruction and training as may be prescribed [section 22g(1)].

Education, training and provision of information are critical elements of any system, integrally related to other aspects of life and accomplished through a variety of means. The government, through the general education system, provides basic education, and this is used as the basis for specific training through colleges, private and public institutions and, finally, in-house or on-the-job training provided and funded by employers.

Employers, under the *Workers' Compensation Act* , may form themselves into associations for the purpose of education in accident prevention. These accident prevention or safety associations are funded through the Workers' Compensation Board and have, traditionally, have been run by boards of directors from the employers they represent.*

Recently, the Workers' Compensation Board has also funded the Workers' Health and Safety Training Centre which was originally run by the Ontario Federation of Labour but now trains non- unionized as well as unionized workers. Depending on the specific organizations, individual unions and employer trade associations also provide some occupational health and safety information, education and training for their members, funded through membership dues and/or users' fees. There are also a variety of private companies that offer education and training sessions, seminars, etc., on a fee-for-service basis.

It is generally felt that education and training in occupational health and safety is not adequate. Access to education and training is particularly important for small businesses that are less likely to have resources (personnel, money and time) for in-house or other forms of training.

Strategies to Improve Provision of Information, Education and Training

Council recommends:

ACOHOS RECOMMENDATION 89-20

that the Minister of Labour establish a mechanism for liaising with

a) organizations and institutions involved with education and training in order to facilitate incorporation of health and safety issues into their programs and encourage those that focus on occupational health and safety to consider the special needs of workers and owners/managers in, or entering into, small businesses.

* In the case of construction, labour has had some involvement.

b) associations, organizations and institutions involved with small businesses in order to help co-ordinate educational programs specifically aimed at small business and promote the integration of occupational health and safety issues into their courses and programs.

The types of organizations and institutions include: safety associations; training centres; colleges; universities; trade schools; government agencies and ministries, such as Skills Development, Industry, Trade and Technology, Citizenship, Culture and Communications, Consumer and Commercial Relations and Workers' Compensation Vocational Training Centres; and private companies that specialize in conducting seminars, symposia, etc.

Council also recommends:

ACOHOS RECOMMENDATION 89-21

that the Minister of Labour give priority to the development and use of strategies to increase the motivation for workers and employers to seek information and for employers to provide information and training for workers.

The task force suggested that one such strategy would be to incorporate into the legislation a requirement that every employer provide every worker, when the worker commences the job, with information on occupational health and safety, the legislation, rights and responsibilities and a list of contacts for further information. It is recognized that, if such a provision were included in the legislation, sample information packages should be developed and available to employers to provide to their workers.

3. Support Services

Included in this category are any services that employers and employees need to help them fulfil their responsibilities and exercise their rights with respect to occupational health and safety - such as provision of information about workplace conditions or the Act or technical help with legal issues, monitoring and medical services. For example, workers have a right to know about the hazardous substances with which they are working and employers have the responsibility to provide the workers with the information and to train the workers in the use of such substances. In this case, suppliers or manufacturers have the responsibility to provide MSDSs and labels on hazardous substances. However, both employers and workers may need assistance to help them interpret the information, for example, for specific applications or conditions.

Responsibilities in the Present System

Employers have the major responsibility for health and safety in the workplace. Under section 14(2)(g) of the Act the employer is required to take every precaution reasonable in the circumstances for the protection of a worker. The Act and regulations contain many specific duties for a variety of different situations and operations.

The types of occupational health and safety support services an employer may require or be required to provide include: industrial hygiene (surveys, auditing, monitoring); health services (assessing, testing, monitoring); technical information and/or research

on specific products, chemicals, equipment or procedures, e.g. hazards, safe use of, alternatives, etc.; and legal services (counselling, advice, interpretation and, in the case of orders or prosecutions, defence). In providing employees with information, instruction and supervision, employers often need to seek external expertise or services. Generally, these services are purchased by employers either by hiring/contracting personnel with the expertise or on a fee-for-service basis from a company or institution. Employers in small businesses are usually unable to provide support services in-house, and both employers and workers will tend to be less able or knowledgeable about how to access those services already available.

Workers also have responsibilities. Primary among these are to work safely in compliance with the Act and regulations and to wear or use protective devices, etc. Worker members of joint health and safety committees and health and safety representatives have added responsibilities under the Act. Generally, employees are reliant on the employer for information, instruction and a safe workplace. One of the problems of such a system is, if the employer does not provide the needed information, supervision or equipment, the worker may not know what he or she should do or be aware of deficiencies.

The worker is also reliant on the employer for a job and may be reluctant to bring concerns, hazards and, more particularly, areas of non-compliance to the employer's attention [as required in section 17(1)(d)]. There are rights for workers enshrined in the Act: the right to know, the right to participate and the right to refuse unsafe work. Workers acting in compliance with the Act are also protected from reprisals by employers.

Workers should be aware of these rights and responsibilities, and the employer is required to post, in the workplace, a copy of the Act and material prepared by the ministry that outlines: rights, responsibilities and duties of workers [section 14(2)(h)]. It is commonly felt that the rights and responsibilities under the Act are not well known by either employers or workers, especially in small businesses. So, although workers in small workplaces will also need special support services to help them fulfil their responsibilities, if they are not aware of their rights and responsibilities (e.g. their rights to be provided with information, training, safety devices, etc. and their responsibility to use them), they will not understand what they need or how to use the supports. In providing support services to workers in small business, there has to be recognition of the importance of workers being aware and understanding what they can and should do, and then providing the workers the support they may need to fulfil their responsibilities and exercise their rights. In some cases this may mean the providers of support services will need to play an advocacy role for the worker.

Services Presently Available

In exploring types of services that are currently available (see Appendix IV for details), the task force made several observations.

1) There is a wide variety of services, e.g. providing information, legal, industrial hygiene and medical services.

2) The availability and funding vary, as do the organizations and clientele.

3) Generally, there was a sense of frustration amongst the service providers about their inability to 'get to' small business. Clientele tended to be medium to large businesses.

4) Funding was a problem, e.g. if the organizations were community-based and not fee-for-service but dependent on government grants or charitable organizations, there was a great deal of uncertainty about whether funding would continue. The only services that can be fee-for-service appear to be medical and health testing, and industrial hygiene services. The former could be arranged, in some cases, through OHIP, and, hence, would be more readily available to small business, but hygiene services were often considered to be too expensive to be accessible to small business. It was considered that, if provision of information, advice, counselling, etc. were fee-for-service, there would be a strong disincentive for parties to seek the services.

5) Very few, if any, organizations were generally serving both management and workers (and, in some cases, this was not through lack of trying).

6) Referral networks do exist but are generally weak and tend to be unco-ordinated.

7) In some cases existing organizations added services while others, often community-based organizations, developed in response to a perceived need.

8) Many organizations used the same central information sources or 'back-up' services. Some referred clients while others preferred to obtain information from several sources, collate it, and interpret it for their clients. However, there was a sense that these central services could not meet many more demands.

The task force was impressed by the range and scope of the organizations, the services provided and the expertise and dedication of many of the individuals involved. However, each, alone, appears to have limited impact.

It was apparent to the task force that no one support service could be sufficient, nor could the provision of a variety of support services alone solve the problem of occupational health and safety in small workplaces. As noted earlier, without an awareness of occupational health and safety, awareness of responsibilities and rights and incentives to take action, the workplace parties are not likely to recognize they need, let alone use, the support services.

The task force noted advantages of organizations developing in a community in response to perceived needs; however, such a process tends to militate against centralized, comprehensive, co-ordinated services. Also, the need for certain centralized back-up services was noted. Particularly important are 'primary support services', such as those provided by the Canadian Centre for Occupational Health and Safety, which, as well as providing information to workers and employers, also serves as a resource for community-based and other services. Many of the organizations emphasized the importance of such a centralized, national data bank that is comprehensive, accessible and credible. The issue of funding was recognized as a major concern for both centralized and community-based services.

Council, in a letter to Mr. Sorbara, then Minister of Labour, in June 1989, expressed concern regarding the withdrawal of financing for the Canadian Centre for Occupational Health and Safety. This is particularly important for small businesses as the workers and owners/managers tend to have limited access to other sources of information, and a fee-for-service arrangement is likely to be a significant deterrent to seeking information.

Strategies to Improve Support Services

Council considers that support services play an essential role in the system and are particularly important for workplace parties in small workplaces, which are less likely to have support available internally. Community-based services tend to have the advantage that they arise in response to specific and local needs and tend to be more accessible, especially for workers.

Council recommends:

ACOHOS RECOMMENDATION 89-22

that the Minister of Labour ensure

- the development and strengthening of a system of community-based resources;
- that stable sources of funding for community-based services are developed; and
- that a mechanism be established for some coordination, networking and referrals that will provide for the more efficient use of the expertise and funds available.

Council's recommendations on the means of implementing the strategies are set out in the Organization/Administration of Strategies section. Important issues such as the need for a system to evaluate services and, in the case of professional services, the need for accreditation, etc. are also dealt with in that section. The issue of funding is considered of fundamental importance and is discussed in greater detail in the section on funding.

4. Enforcement

Responsibility and Present Practice

Government is responsible for the enforcement of the Act and regulations. The Act outlines duties and powers of inspectors. Ministers have acknowledged that there are not (and, likely, never will be) sufficient resources to inspect all workplaces in the province regularly, and have emphasized the importance of the internal responsibility system and the role of the health and safety representative and joint health and safety committee in inspecting the workplace and identifying hazards.

Workplaces with fewer than 20 workers are not required to have joint health and safety committees or health and safety representatives* so it could be reasoned that the role of the ministry inspector is more important in small workplaces. However, due to limited resources and the need to make the most efficient use of resources, small workplaces tend to be inspected infrequently. The role of inspections goes beyond enforcement of the legislation. Inspections increase awareness of the legislation, help employers and workers (at least those that accompany the inspector)

* Bill 208, *An Act to amend the Occupational Health and Safety Act* proposes to amend this, such that health and safety representatives would be required in all workplaces regularly employing five or more workers and not required to have a joint health and safety committee.

to understand the process of identifying hazards and provide an incentive, both for employers and workers, to comply with the legislation.

The task force was often reminded of the value and importance of inspections and enforcement, and it noted that, in order to get the maximum benefit from inspections, ministry inspectors should be able to communicate freely with representatives of both workplace parties. In many cases this may require additional language skills as well as sensitivities to cultural and ethnic differences and to the special needs of both workers and owners/employers in small workplaces.

ACOHOS RECOMMENDATION 89-23

> that the Minister of Labour take the steps necessary to ensure that inspectors are able to communicate freely with representatives of both workplace parties.

Concern has been expressed that workplaces that are inspected may, if required to install expensive controls, be unfairly disadvantaged if the competitors are not inspected. For this reason and because, with present resources, it cannot be realistically expected that all workplaces can be frequently inspected, the task force emphasized the importance of not only targetting certain high risk industries, but also ensuring that enforcement is equitable for all workplaces in those industries.

ACOHOS RECOMMENDATION 89-24

> that the Minister of Labour ensure that enforcement of legislated standards is strict, uniformly applied and equitable.

There was a suggestion that, as a means of aiding the enforcement of minimum standards for certain high risk industries and occupations, some form of registration process be instituted. Such a process could also aid in increasing awareness and serve as a means of providing registrants with information, for example, on specific hazards and preventative strategies.

Council understands that ministry inspectors, under certain circumstances, use a questionnaire or checklist to assess a worker's knowledge and/or training. Council emphasizes the importance of workers receiving and understanding information and training related both to the specific hazards of their jobs and to their rights and responsibilities and sees the use of questionnaires and checklists as potentially useful means of determining whether workers have received and understand information on occupational health and safety.

ORGANIZATION/ADMINISTRATION OF STRATEGIES

Recognizing the features of the present system, the task force identified a number of strategies in each of the areas that it considered would help the system function more effectively in small workplaces. However, the issue became how the strategies could be carried out, where the funds should come from and who should be assigned the authority and responsibility for ensuring that they are carried out.

that the Minister of Labour ensure that the responsibility for the following functions is clearly assigned and that there is a mechanism to coordinate the functions and integrate them into the overall system for occupational health and safety:

- **liaison with government agencies and organizations providing services (e.g. Ministry of Health, Ministry of Industry, Trade and Technology, Community and Social Services, Law Society, etc.);**
- **development of an inventory of services;**
- **development of mechanisms for co-ordination, networking, and providing referrals within the support system;**
- **identification of gaps and overlaps in services;**
- **identification of specific needs for**
  a) **small workplaces in general;**
  b) **specific industries that are predominantly small, e.g. auto body shops, dry cleaning;**
- **identification of strategies appropriate to meet the needs identified;**
- **identification of resources needed (e.g. money, professionals, technology, information) and, in some cases, the provision of resources or referrals to other organizations;**
- **establishment of priorities - this should include identifying high risk industries, processes and/or substances;**
- **administration of funding for**
  - **support services;**
  - **resources;**
  - **research for solutions for common problems, e.g.**
    - **substitutes for toxic substances;**
    - **technology to avoid exposure;**
    - **control technologies;**
- **development of criteria and guidelines for**
  - **evaluating proposals for funding, e.g. for quality of service and ability to meet needs in a particular location;**
  - **evaluating effectiveness of projects;**
- **monitoring projects;**

- soliciting proposals and encouraging the development of community-based initiatives to aid small business in the areas where needs have been identified;

- encouraging existing agencies to extend/expand services to meet specific needs of workers and/or employers in small business and to reach out with information, raise awareness and integrate occupational health and safety into their activities. It is noted, for example, that public health departments already have access to a large number of small businesses for related reasons (protection of public health and promotion of personal health) and fire departments sometimes map the location of hazardous chemicals and inspect for fire hazards;

- considering, recommending and, possibly, implementing incentive strategies;

- ensuring that the interests of employers and workers in small business are represented in policy formulation;

- monitoring the effectiveness of programs in general and determining whether workers in small businesses (especially those lacking back-up services, such as those provided by unions), are adequately protected and are aware of their rights and able to exercise them without fear of intimidation and, if not, considering strategies to ensure that such workers are protected and able to ensure their own protection.

Bill 208, *An Act to amend the Occupational Health and Safety Act and Workers' Compensation Act*, which was tabled in the legislature in January 1989, proposed certain organizational changes including the establishment of a Workplace Health and Safety Agency. The agency, which would be a joint labour-management board, would have the responsibility for many aspects of education and training as well as for promoting public awareness and administering funding for the safety associations, training centres, medical clinics (presently funded through the ministry) and occupational health and safety research. It appears that this proposed agency would also be taking over the role of the Advisory Service on Occupational Health and Safety of the Ministry of Labour. The Advisory Service on Occupational Health and Safety has provided start-up funds and sometimes, operating funds for a number of organizations that are providing support services in the community.

Council considers that such an agency would be the appropriate body to implement the strategies identified in the areas of awareness, education and training, and support services.

However, it should still be incumbent on the minister, through the ministry, to ensure that strategies to address concerns of the diverse, more difficult to reach and small businesses are integrated into *all* aspects of the occupational health and safety system, including development of policy and legislation, program implementation and enforcement.

FUNDING

It appears that the funding for the agency proposed in Bill 208 would consist primarily of money from the Workers' Compensation Board (which was assigned to safety associations and training centres) and the transfer payments from the ministry that were assigned to the Advisory Service on Occupational Health and Safety.

As most of the functions identified above come within the mandate of the proposed agency, and as the funding arrangement for the agency appears to take into consideration the responsibilities of the workplace parties and the present arrangement for provision of information, education and training, such a funding arrangement also seems appropriate for implementing strategies recommended by council.

Council considers that many of the objectives of the strategies could be accomplished by a redeployment or more effective use of the present funds, e.g. altering the emphasis of the information so that efforts at reaching out to small companies are more effective; co-ordinating support services; determining criteria for funding, etc., and that once all these functions were under an agency, such redeployment would be easier. Some concern was expressed that the board of the agency proposed in Bill 208 would not have adequate representation from small workplaces. It is recognized that, due to the nature of small businesses and the fact that most of the workers are not unionized, it would be very difficult to have 'representatives' that could speak for small workplaces generally. For this reason, it was considered essential that a mechanism be found, in consultation with affected parties, to ensure that the agency, the ministry, the Workers' Compensation Board, or any other bodies administering and overseeing these strategies, are responsible for making the issues facing the workplace parties in small diverse workplaces a high funding priority.

As noted earlier, council considers that support services play an important role. In some cases support is needed to aid in the collection and dissemination of information that may be highly technical and requires frequent updating. In this respect, council has expressed concern about the announcement by the federal government of its intention to withdraw funding from the Canadian Centre for Occupational Health and Safety as it is considered an essential primary support organization, especially at a time when 'the right to know' and WHMIS are increasing the demands for information.

Support services also play an important role in helping workplace parties fulfil their responsibilities and supporting them in exercising their rights where necessary. In many cases these support services are needed because employers, for various reasons*, are unable to access or provide the information, education, training and other services required to fulfil their responsibilities under the Act.

As noted earlier, community-based organizations have developed in response to these needs. While there continue to be needs, a stable source of funding is required to help address them and is fundamental to the survival and development of such services.

It was considered important that the proposed agency or similar body responsible for administering funding for support services recognize that the needs of the two parties will often be different and sometimes in conflict. Because of the importance of the

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* Some of the reasons have already been outlined in this document and have to do with their size, economies of scale, etc.

balance of rights and responsibilities, it will be necessary to ensure that supports for the specific needs of workers and owners/employers will get equal attention and have equal opportunity for funding. Concern had been expressed that, in the present system, if an organization's activities were directed primarily towards one workplace party, its funding opportunities would be jeopardized.

It has been observed that the present system of funding support services and the pressure to move toward fee-for-service appears to be adversely affecting community-based organizations serving labour or workers. This is of particular concern because the workers that are not getting information, education and training through their places of employment have very limited resources upon which to draw.

As it has been suggested that large companies may be getting proportionately more benefit from the safety associations, training sessions and support services, and as there appears to be a need for support services that are being provided by community-based organizations, council suggests that the present funds could be deployed more effectively.

One task force member expressed concern with the proposal that all the funding needed for the proposed strategies come from Workers' Compensation Board assessments because such assessments were considered a payroll tax and the owners/managers would have little, if any, control over it or its expenditure.

This concern was noted; however, other members considered that, as the owners/managers have the primary responsibilities, funding for such supports that they are unable to provide internally should come from some form of pooled resource.

ACOHOS RECOMMENDATION 89-26

> that the Minister of Labour make whatever arrangements as are necessary, recognizing the responsibilities of the workplace parties, to ensure that there is a stable source of funds to implement the strategies identified above such that the resources are available to provide both employers and workers with the information and support needed to play an effective role in protection of health and safety in the workplace.

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6. Evans, J. (1984) *Summary Report: Workshop on Improving Occupational Health and Safety at Small Employer Work Sites.* Alberta Occupational Health and Safety Division.
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APPENDIX I

ADVISORY COUNCIL ON OCCUPATIONAL HEALTH AND OCCUPATIONAL SAFETY

TASK FORCE ON SMALL BUSINESS

Terms of Reference

1) Review the *Occupational Health and Safety Act* and regulations and the ministry's policies regarding enforcement to identify differences in application for large and small workplaces.
2) Review data regarding the levels of occupational safety and health achieved in small as compared to large workplaces.
3) Review current initiatives to address the problems of health and safety in small workplaces being undertaken by associations, organizations and government departments in Ontario.
4) Review methods used in large companies to deliver health and safety practices to small units within a large workplace and/or to geographically distinct workplaces.
5) Identify significant factors that cause occupational health and safety conditions to differ between small and large workplaces, such as:
   - access to materials, resources and training;
   - motivating factors;
   - current means of disseminating information, etc.
6) Analyse the current policies and initiatives to determine whether they take into account the differences in conditions and whether the goal is uniform protection of health and safety in all workplaces (regardless of size).
7) Recommend strategies and means of implementing strategies to deal with the problems of health and safety in small workplaces.
8) Recommend means of auditing the effectiveness of the strategies (and their implementation) identified in 7.

Membership

Council

D. Dewees - chairman
R.T. Boldt (to November 1988)
T. Byrne
D.R. McCalla
D. Morrison
H.D. Moyer (from January 1989)
G. Nipshagen (to March 1988)
C.J. Tuohy
D. Ublansky

Others

J. Brophy, Windsor Occupational Health Information Service
J.M. Andrew, Canadian Federation of Independent Business (from March 1988)

APPENDIX II

The Small Business Task Force was established following a recommendation to council from council's Alternatives Group (whose members were included in the membership of the Small Business Task Force). The Alternatives Group met with individuals from:

Mines Accident Prevention Association of Ontario,

Ontario Hospitals Association and Ontario Health Care Safety Association,

Industrial Accident Prevention Association, and

Ad Hoc Industry Group

for discussion of implementation of occupational health and safety legislation in Ontario workplaces.

The Small Business Task Force met with:

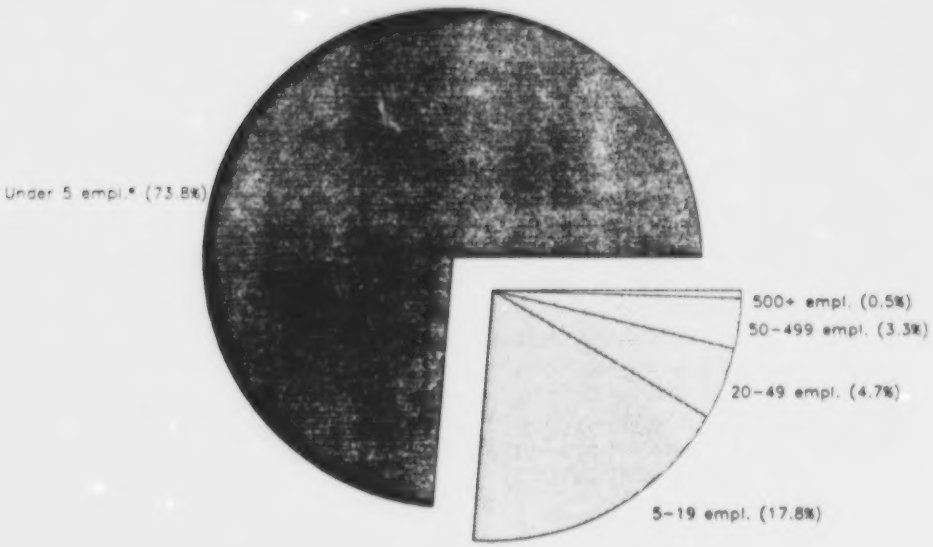
		1988
Tim Millard	(Assistant Deputy Minister) Occupational Health and Safety Division Ministry of Labour	June 23
		1989
Ken Adamson	(President) Dry Cleaners & Launderers Institute (Ontario)	January 26
Bonnie Heath	(Program Coordinator) Lakeshore Area Multi-Service Project (LAMP)	January 26
Ron Lees	(Director) Occupational Health and Safety Resource Centre, Queen's University	March 16
Garth Dee	Toronto Workers' Health & Safety Legal Clinic	March 16
Jeanne Javanoski	(Environmental Coordinator of Information & Education) Environmental Protection Office	April 6
	and	
Richard Boehnke	(Manager of Environmental Health Inspection Services) Eastern Health Area Department of Public Health City of Toronto	April 6

APPENDIX IIIa

Ontario

Distribution of businesses by size of firm 1986

In 1986 there was a total of 289,113 firms with paid employees.* The following chart shows the breakdown by size of firm.



* Full-year equivalents

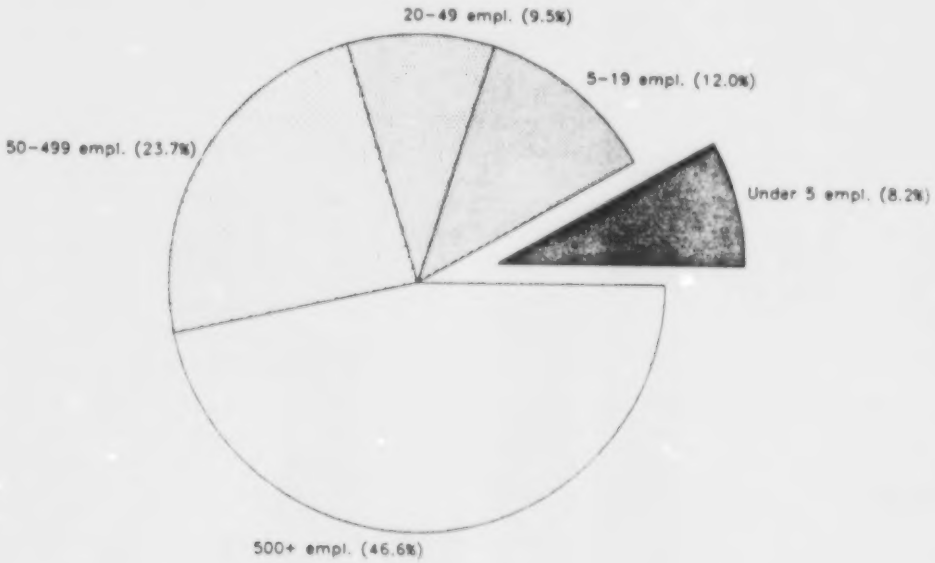
Source: Statistics Canada; Business Microdata Integration and Analysis and Small Business Statistics: Employment Dynamics by Province, 1985-86. Compiled by CFIB (Toronto, September, 1988).

APPENDIX IIIb

Ontario

Distribution of employees by size of firm
1986

In 1986 there was a total of 4,011,500 paid employees*.
The following chart shows the distribution by size of firm.

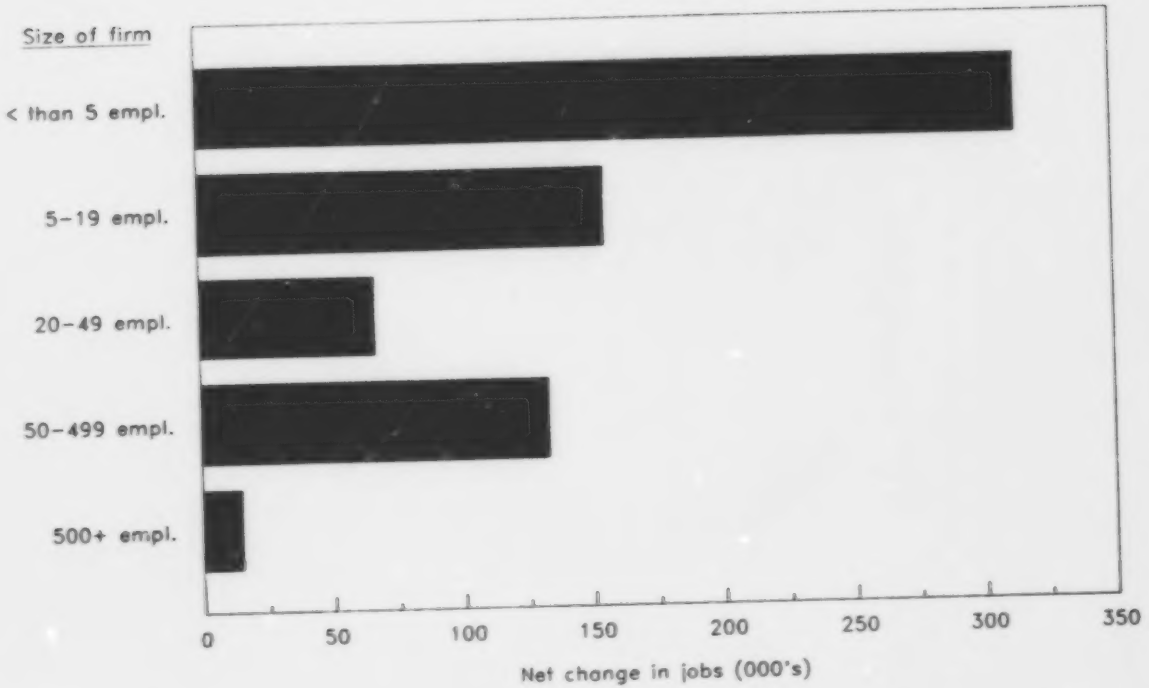


* Full-year equivalents

Source: Statistics Canada: Business Microdata Integration and Analysis and Small Business Statistics: Employment Dynamics by Province, 1985-86. Compiled by CFIB (Toronto, September, 1988).

Ontario

Net job creation in the private sector by size of firm 1978 - 1986



• Full-year equivalents

Source: Statistics Canada; Business Microdata Integration and Analysis and Small Business Statistics: Employment Dynamics by Province, 1978-86. Compiled by CFIB (Toronto, September, 1988).

APPENDIX IV

There are a number of organizations available to help the workplace parties fulfil their responsibilities and exercise their rights. The task force did not endeavour to perform a comprehensive survey but, rather, reviewed some organizations to identify the range and potential.

Information was gathered through a number of means and sources:

- documents and published articles;
- telephone conversations;
- staff visiting organizations;
- presentations to the task force.

Information on a variety of organizations was summarized and considered by the task force. Attachment 1 lists, in table form, some of the organizations, the type of service or function they perform [either as a primary (1°) or secondary (2°) function]; the clients that can or do use the service; brief comments; and their primary source of funding.

A contact list was developed which includes organizations from which further information was not sought and others that were not contacted directly.

Attachment 2 contains summary comments on the types of organizations providing service in information (2.1), health care (2.2), hygiene (2.3), legal (2.4), advocacy (2.5), and other (2.6).

As the task force's purpose was to get an idea of the scope and potential of services, information on better known services was not included (e.g. safety associations, various government departments, Workers' Compensation Board, etc.).

Examples of Types of Services and Organizations
(Summary of information assembled for the task force)*

ATTACHMENT 1

Summaries	Services: Information	Health Care	Hygiene	Legal	Other	Advocacy	Clients	Funding	Comments
1. Metro network for occupational health and safety for unorganized workers					1°	?	O	M	networking - specific for occupational health and safety
2. Small Business Development Project					1°	?	C	G	facilitation/community development - general for small business
3. Ontario Prevention Clearing House					1°		A	G	referral/network - general for health promotion and 1° prevention
4. Canadian Centre (CCOHS)	1°						A	G	collation, storage, retrieval and dissemination - specific for occupational health and safety
5. CMSCA	1°					2°	M	M	trade association, general information - specific for trade, some advice, lobbying, etc.
6. Dry Cleaner's and Launderer's Association	1°					1°	M	M	trade association, general information - specific for trade, some advice, lobbying, etc.
7. IAPA	1°		2				M	WCB	- safety association specific occupational health and safety information, advice, education, training, etc.
8. Windsor Occupational Health Information Services	1°					2°	W	G&C	information, referral, facilitation - specific for occupational health and safety
9. LAMP Project	2°	1°				2°	W	G	Community Health Centre (demonstration project) - specific for occupational health and safety facilitation, education, advice and problem solving
10. South Riverdale Project	1°	2°				?	W		Community Health Centre (past project) - specific for occupational health and safety information, out-reach and education

Attachment 1 continued

Summaries	Services: Information	Health Care	Hygiene	Legal	Other	Advocacy	Clients	funding	Comments
11. Parkdale	1*	2*				?	W		Community Health Centre - specific for occupational health and safety, education, out-reach (past project)
12. Toronto Public Health					1*		C	MG	- general health promotion and illness prevention
13. Immigrant Women's Health Centre	2*	1*					W	?	- general health issues, but in workplace, referrals
14. Occupational Health and Safety Resource Centres	1*		1*				W&M		- specific for occupational health and safety, - assessments, referrals and education
15. Toronto Workers Health and Safety Legal Clinic	2*		±	1*		1*	W	G	- specific for occupational health and safety, assessments, advice, counselling, referrals and problem solving for unorganized workers
16. Fire Department									
a) prevention					1*		A	MG	- general fire prevention, may get into other areas
b) fire fighters association					1*			its W	- general issues that affect their work, e.g. WHMIS
17. Insurer's Advisory Organization					1*		M		- general loss control - potential for entering occupational health and safety field
18. St. John's Ambulance	2*				1*		A		- general health promotion, out-reach on safety and first aid training
19. Canadian Cancer Society	1*					1*	A	C	- elimination of cancer, support research, support for cancer patients, public education re cancer including a new project on environmental and occupational carcinogens

A = Anyone
C = Community
G = Government
M = Management
MG = Municipal government
N = None
O = Organizations
U = Union
W = Workers

*It was recognized that the information as assembled is not comprehensive but was set out to indicate the variety of types of services, funding and clients available.

ATTACHMENT 2

2.1 Information Services

There are numerous organizations available for providing information and/or referrals. They vary according to:

- geographical area serviced, e.g. from pan Canadian (CCOHS) to very local community groups such as LAMP which serves the Lakeshore Area (Mimico) of Toronto;

- their sources of funding. Although funding is largely dependent upon whether the information service is specific to occupational health and safety (e.g. CCOHS, Windsor Occupational Health Information Services), part of general health information (The Ontario Provincial Clearinghouse) or part of other services (legal aid clinic, health centre, etc.), it appears to be fairly generally recognized that information services cannot be cost-recovery and hence need government or other sources of funding;

- the governing structure. The services are often under community Boards with or without professionals and with or without concern for a 'balance' in representation, e.g.:

    - CCOHS – tripartite (4)*
    - WOHIS – community (8)
    - LAMP – community (9)
    - trade associations – employers (5 & 6)
    - resource centres – academics and community (14)
    - safety associations – employers (7)

Most of the organizations/services contacted or listed provide some information and referral service and there are numerous other organizations/associations/services which can be considered indirectly related, e.g. St. John's Ambulance (18), Insurers Advisory Organization (17), Fire Prevention (16), but have the potential for more involvement and provide valuable 'auxiliary' services.

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* Numbers in brackets refer to the organization number in Attachment.

2.2 Health Care Services

The task force reviewed a document prepared by the Canadian Centre for Occupational Health and Safety (CCOHS) 'Alternative Occupational Services in Canada - A Survey' from a survey conducted by CCOHS.

The data from the 19 services in Ontario were collated and considered. It was recognized that the list is not comprehensive but it does give an indication of the types of services available.

e.g.: – University-based clinics associated with teaching hospitals and the training of occupational health care professionals (McMaster, University of Toronto)*

- Occupational Health and Safety Resource Centres also associated with universities (Queen's, Waterloo)
- Community health centres (LAMP, Parkdale, South Riverdale)
- 'private' - or physician-run services/clinics
  - consultants (King and Associates)
  - 'private' - clinics (Evans, Wilson)
  - union-based**

those reviewed directly by the task force included:

- LAMP (9))
- Parkdale (11)) all community health centres
- South Riverdale (10))
- Occupational Health Resource Centre, Queen's University

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* These are the centres which also receive funding from Ministry of Labour for professional education.

** Since this survey the establishment of several union-based clinics for workers has been funded by the government.

2.3 Hygiene Services

It appears that, generally, those that are available are private companies/consultants and are funded on a fee-for-service basis.

The resource centres (14) also provide hygiene services on a fee-for-service basis.

In some cases a general workplace assessment is performed free of charge, then companies would be charged for consultation on how to deal with the problems identified or for monitoring the environment to establish whether the workplace is in compliance with standards and/or for establishing the magnitude of potential risk.

Laboratory services for analysing samples are often part of the hygiene services. It appears that the Ministry of Labour laboratories are only available for analysing samples ordered by inspectors. It is believed that some large companies with their own hygiene services and/or laboratory services act as resources or contract out their services to small companies in the surrounding area. (This occurs for branch plants, subsidiaries, etc.).

2.4 Legal Services

There are a number of private law firms dealing with various aspects of labour law, including workers' compensation and occupational health and safety issues. Firms specialize in representing employers or, less often, workers. Unions play an important role in providing legal services for their members. There are some advisory services available through the ministry. It appears that the legal aid clinic (15) which has just been established to specialize in occupational health and safety for non-unionized workers is a fairly new concept.

2.5 Advocacy

These were divided into

1) Employer groups, like
   - trade associations
   - Canadian Federation of Independent Business
   - Canadian Manufacturers Association and, to a lesser extent,
   - chambers of commerce, etc.

2) Employee groups
   - unions
   - labour councils

2.6 Other

In exploring support services, the task force also tended to look for groups that were peripherally involved with occupational health and safety or that were considered to have the potential to be involved.

These were grouped into three broad categories:

1) support groups, e.g.:

   - Injured Workers Consultants
   - Industrial Accident Victims Group

2) organizations with other primary functions but that may be involved in occupational health and safety and/or outreach to small business or have the potential to be involved. Listed in this category are:

   - The Fire Department (16)
   - Insurers Advisory Organization (17)
   - St. John's Ambulance (18)
   - Public Health Department (12)
   - Immigrant Woman's Health Centre (13)

3) co-ordinating bodies, networking committees and community development and referral services. Listed in this category would be:

   - Metro network for occupational health and safety for unorganized workers (1)
   - Small business development program (2)
   - Ontario Prevention Clearing House (3)

Ontario Ministry of Labour
Ministère du Travail de l'Ontario

Office of the Minister
Bureau du Ministre

400 University Ave
Toronto, Ontario
M7A 1T7
416 965-4101

400, avenue University
Toronto (Ontario)
M7A 1T7
416 965-4101

January 3, 1990

Dr. Julian Barling
Chairman
Advisory Council on Occupational Health
and Occupational Safety
400 University Avenue, 11th Floor
Toronto, Ontario
M7A 1T7

Dear Dr. Barling:

Thank you very much for sending me Advisory Memorandum 89-II: Concerning Small Business. Please convey to Council, and particularly to the members of the Task Force on Small Business, my appreciation for the work involved in preparing the report and recommendations.

For reasons elaborated in the Memorandum, it is difficult to define effective strategies to promote and ensure health and safety in small workplaces. I am impressed by the framework of interlinking strategies devised by Council to address these issues.

I agree that the proposed Workplace Health and Safety Agency is the appropriate body to implement many of the strategies identified in the Memorandum, and your concern regarding the representation of small business on the board of the Agency is one that I share. In order to address this concern, I have proposed that a Small Business Advisory Committee be established within the Agency to advise the board on relevant matters including cost-effective ways of supporting improved training in small business. I believe that Council's Memorandum will provide much useful information and direction for this Committee.

.../2

Pending a detailed review of the recommendations, let me thank you again for the efforts that Council has made, and assure you that I will make every effort to ensure that the interests and problems of small business are given full consideration as we move forward with the new initiatives in occupational health and safety embodied in Bill 208.

Yours sincerely,

Gerry Phillips
Minister

Advisory Council on Occupational Health & Occupational Safety
Ontario

Conseil consultatif sur la santé et la sécurité au travail

Office of the Chairman

Bureau du président

January 23, 1990

The Honourable Gerry Phillips
Minister of Labour
400 University Avenue, 14th Floor
Toronto, Ontario
M7A 1T7

Dear Mr. Phillips:

In your preliminary response to council's advice on small business, you refer to concern regarding the representation of small business on the board of the proposed Workplace Health and Safety Agency. You also note that there will be a detailed review of council's recommendations, and that you will make every effort to ensure that the interests and problems of small business are given full consideration. Council has asked me to clarify that the concern council noted in Advisory Memorandum 89-II was that 'the board of the Agency proposed in Bill 208 would not have adequate representation from small workplaces', i.e. representation from workers and employers.

The document went on:

> 'It is recognized that, due to the nature of small businesses and the fact that most of the workers are not unionized, it would be very difficult to have representatives for small workplaces generally. For this reason, it was considered essential that a mechanism be found, in consultation with affected parties, to ensure that ... (the bodies) ... administering and overseeing these strategies are responsible for making the issues facing the workplace parties in small diverse workplaces a high funding priority'.

In other advice (Advisory Memorandum 89-I), council has noted the difficulty of 'getting representation for non-unionized workers' and emphasized 'the importance of the Agency considering the needs of all workers, whether or not they are unionized'.

ACOHOS recommendation 89-25 contains a list of functions council considers would help make the occupational health and safety system more effective for small workplaces. Council suggested that the Agency, proposed in Bill 208, would be the appropriate

body to deal with a number of functions which fall within its mandate. Under these conditions it would be up to the board of the Agency to determine the means of dealing with these issues. This would be consistent with Advisory Memorandum 89-I in which it was noted that 'the Agency will have to work out the details for the administration of many of its duties'.

Recognizing that not all the functions listed in Recommendation 89-25 are within the mandate of the Agency, the recommendation stated:

> 'that the Minister of Labour ensure that the responsibility for the following functions is clearly assigned and that there is a mechanism to co-ordinate the functions and integrate them into the overall system for occupational health and safety ...'.

Yours truly,

Julian Barling
Chairman

c.c.: G. Thomson
T. Millard

Note: See also correspondence concerning release of advisory memoranda (pages 35 and 36 of this annual report).

Ontario Ministry of Labour
Ministère du Travail de l'Ontario

Office of the Minister
Bureau du Ministre

400 University Ave
Toronto, Ontario
M7A 1T7
416 965-4101

400, avenue Universi
Toronto (Ontario)
M7A 1T7
416 965-4101

February 15, 1990

Dr. Julian Barling
Chairman
Advisory Council on Occupational Health
and Occupational Safety
11th Floor, 400 University Avenue
Toronto, Ontario
M7A 1T7

Dear Dr. Barling:

Thank you for your letter dated January 23, 1990, clarifying Council's concern in Advisory Memorandum 89-II, with respect to representation from small workplaces on the board of the Agency.

I understand the importance of having the views and needs of the parties in small workplaces, both workers and employers, properly represented. As I mentioned in my letter to you dated January 3, 1990, I am proposing that a Small Business Advisory Committee be established within the Agency to advise the board on relevant matters. It is intended that this committee will consist of equal numbers of workers and employers from the small business community. It is also intended that representation from non-unionized workplaces be included on the committee.

Thank you again for your clarification.

Yours sincerely,

Gerry Phillips
Minister

Advisory Memorandum 89-III

Ontario

Advisory Council on Occupational Health & Occupational Safety

Conseil consultatif sur la santé et la sécurité au travail

Office of the Chairman

Bureau du président

400 University Ave. Toronto, Ontario M7A 1T7

400, avenue Univer Toronto (Ontario) M7A 1T7

416/965-2448

416/965-2448

February 14, 1990

The Honourable Gerry Phillips
Minister of Labour
400 University Avenue, 14th Floor
Toronto, Ontario
M7A 1T7

Dear Mr. Phillips:

On behalf of council I am pleased to submit Advisory Memorandum 89-III: Concerning Education and Training.

We believe that the recommendations contained in this document will help bring about changes in education and training which will improve occupational health and safety in Ontario.

Yours truly,

Julian Barling

Julian Barling
Chairman

c.c.: G. Thomson
T. Millard

Advisory Memorandum 89-III to the Minister of Labour February 14, 1990

Concerning Education and Training

Council considers that the effectiveness of any system for protecting health and safety of workers depends on workplace parties having the knowledge and skills to perform their tasks and fulfil their responsibilities. Education and training are essential first steps towards acquiring the knowledge and skills required. At the same time, council realizes that education and training, alone, will not ensure health, safety and well-being in the workplace.

BACKGROUND

In 1978 council established a task force on occupational health and safety manpower needs, education programs and occupational health and safety information. The main focus of Advisory Memoranda 78-III[1] and 80-I[2] was manpower training. Since that time, the importance of education and training for workplace parties has been the subject of considerable discussion in council, and numerous recommendations have been made to the minister dealing with the subject in a variety of contexts.

In 1987 council established a task force to address occupational health and safety education and training, specifically, even though council and other task forces were also considering education and training issues. For example, council's task force on small business identified awareness, education, training and provision of information as areas needing special attention, and a number of the recommendations in Advisory Memorandum 89-II[3] were devoted to these topics. As well, Bill 208, *An Act to amend the Occupational Health and Safety Act and the Workers' Compensation Act*, proposed amendments that would directly affect education and training; therefore, council's review of the bill and its subsequent advice (Advisory Memorandum 89-I[4]) included discussion of education and training in the context of the proposed amendments.

GOAL

With respect to education and training in occupational health and safety, council considers the goal to be:

> A society that is aware of health and safety in all life's activities, has sufficient education, training and incentive to identify hazards, has knowledge about where to obtain information on specific hazards, how to prevent, control or deal with them, and has knowledge of rights and responsibilities regarding occupational health and safety.

This overall goal assumes that, in the ideal system, occupational health and safety is fully integrated into all other aspects of health, safety and well-being.

Therefore, the approach taken by council to identify strategies to help achieve this goal was to consider occupational health and safety education and training in a broad context.

This document contains a very brief description of this approach, some of the terms used and recommendations for strategies to help achieve the goal.

In this document:

awareness will be used to mean consciousness of the issue;
education is the process of communication or development of *knowledge*;
training is the development of *skills*, practical education; and
information refers to facts told or heard or discovered. In this context information may be considered to be the answers to questions asked about occupational health and safety.

Figure 1 represents a schematic approach to identifying the different institutions and types of education and training that are, or could be, part of the broad system of occupational health and safety education and training. These have been broadly grouped under three headings: 1) 'General Education'; 2) 'Professional/ Technical Training' preparing for specific jobs; and 3) 'Other', which includes those that respond to a perceived need for information, education or training and those outside the current general professional/technical education systems.

The institutions fall under many different jurisdictions: e.g., Ministry of Education, local boards of education, Ministry of Colleges and Universities, Ministry of Skills Development, Workers' Compensation Board, federal Department of Labour as well as community, free enterprise and various collectives, associations and groups.

The levels or types of occupational health and safety education have, for simplicity in Figure 1, been classified into six broad groups: 1) awareness; 2) concepts and general knowledge (including knowledge of the Act); 3) education on specific hazards, processes, etc.; 4) professional and technical training; 5) information (responses to requests) regarding specific substances or processes; and 6) administrative skills to deal with responsibilities in occupational health and safety. In Figure 1 these types of education/training/information are indicated by superscripts (1 to 6) for the various institutions that are, or could be, providing them.

Beyond general education and training in occupational health and safety, the specifics that each individual needs depend upon the role and responsibilities that the individual has to fulfil. Such specifics can be determined by analysing each role to determine what is needed to fulfil the responsibilities in a manner that will be most effective in making the work environment safe and healthy, preventing occupational accidents, injuries and illnesses and dealing with situations or problems as they are identified.

DISCUSSION AND RECOMMENDATIONS

Based on consideration of the overall goal and of occupational health and safety education and training in a broad context, council recommends two courses of action that it believes should be undertaken concurrently. One is a comprehensive life-cycle strategy that has the objective of integrating occupational health and safety into all aspects of the life cycle, especially into the educational system. Because it will take time for the *full* impact of this approach to work through the system, and because there are immediate and urgent needs for educating and training workers presently in the workplace, council also recommends a short-term strategy that has the objective of raising awareness, training and re-training people currently in the workplace.

Comprehensive Life-Cycle Strategy

As a means of increasing society's awareness and understanding of the importance of occupational health and safety, it is considered essential that basic concepts of health promotion, accident and illness prevention and hazard identification and control are integrated into the educational system at all levels.

Awareness raising should begin in early childhood, and concepts and examples should be integrated into existing school curricula. Council considers it particularly important that these concepts are well developed by the time students start entering the work force and start preparing for careers. Children often commence part-time work at a very early age. Some children in primary school deliver newspapers, shovel snow and perform other odd-jobs for some form of remuneration. Children should understand the fundamental concepts of health and safety and learn to apply them to their work environments. Work habits learned early are often carried into later life.

Fundamental concepts learned in school should form the basis or introduction for the further specific education and training in occupational health and safety that should be an integral part of all technical and professional education. Of particular importance in this area are the 'co-op' programs conducted by many secondary/ post-secondary schools. It is important that, as well as education on the specific health and safety aspects of the job, the concept of occupational health and safety and rights and responsibilities be integrated into such programs.

The fact that the rate of accidents is greatest in the first three months on a job emphasizes the need for people to have a good background in occupational health and safety when they enter a workplace. They should also have a knowledge of their rights and responsibilities, including their entitlement to specific education and training at the workplace before they commence performing their assigned tasks.

Occupational health and safety education and training can be, and in some cases is, introduced as a subject in school curricula. It can also be integrated into existing courses.* Council notes the advantages of introducing the concepts into a wide range of different courses, using practical examples. For instance, conditions and outcomes of the Industrial Revolution can be included in history courses; measuring exposure to toxic substances can be used in mathematics and chemistry, examples using the school environment could be worked through in practical classes and as projects; calculation of safety aspects of equipment could be incorporated into physics; concepts of toxicology and the significance of workplace contact/exposure could be included in chemistry and biology classes; business courses should include occupational health and safety and relevant legislation as important considerations in business and financial management.

This approach should help to illustrate the breadth of the concepts of health and safety and their significance and applicability to most aspects of life. Hopefully, reiteration in different contexts will facilitate incorporation into students' thinking. Although separate courses in occupational health and safety have advantages, they are often introduced into an already crowded curriculum. Students might well choose not to take such courses. Even if they do take the course(s), much of the impact could be lost if the message is not reinforced in other subjects.

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* It is noted that this is currently being done in Victoria, Australia, where the Occupational Health and Safety Commission is working with curriculum writers for the Ministry of Education.

As a means of facilitating the incorporation of occupational health and safety concepts into the educational system, the importance of occupational health and safety will have to be emphasized in teachers' training courses. It will also be important to involve teachers in the development of resource materials to be used in schools. For teachers already in the system there should be reinforcement through Professional Development (P.D.) days and other continuing education programs.

As well as this important foundation in the primary and secondary schools, there should be an emphasis on occupational health and safety issues in the education and training of professionals.

For various professional groups the focus will be different and should include issues that are important not only for protecting the health and safety of the people in the groups, but also the ways their work will influence or deal with occupational health and safety issues generally; for example, the importance of:

- engineers, architects, etc. including occupational health and safety considerations in the design of buildings, equipment and machinery;
- research and development personnel considering the hazards, and potential for hazard, of substances and processes prior to new substances, processes or technologies being introduced into workplaces;
- health care professionals knowing and understanding the implications of occupation, exposure and general work conditions on health and well-being, so that they can help identify potential hazards and emphasize the importance of health promotion and disease, accident and illness prevention;
- lawyers and judges knowing and understanding the system of rights and responsibilities as well as means of dealing with occupational health and safety issues.

Trade schools, apprenticeship and technical training should include information on safety and health considerations relevant to the specific techniques, trades or processes being taught. All these technical aspects should build on a basic understanding of occupational health and safety and the rights and responsibilities of the various people in the workplace.

All aspects of education and training should be analysed to identify occupational health and safety implications. Then modifications should be made to courses or programs to emphasize the philosophy of identifying potential hazards, means of dealing with hazards, basic rights and responsibilities and means of obtaining information and help when necessary.

Council recognizes that to incorporate occupational health and safety education and training into the general education system throughout the life-cycle is an enormous task and will require the co-operation and participation of numerous different groups and agencies.

This comprehensive life-cycle strategy cannot be tackled by any one government ministry. It will require many different ministries and departments taking action and, as far as is possible, co-ordinating efforts. For this reason, council recommends:

that the Minister of Labour recommend that the Premier's Council take the steps necessary to ensure the development of a comprehensive strategy for increasing awareness and integrating understanding and knowledge of occupational health and safety into all aspects of education and training throughout the life cycle, and to ensure that the Ontario government makes a firm commitment to the co-ordinated implementation of the strategy.

The actions described in this comprehensive strategy will take time to 'work through' the life-cycle. It will take time to change the 'mind set' of society so that people entering the workplace are aware of the importance of occupational health and safety and understand their rights and responsibilities and so that people can approach any workplace or task with an eye to identifying potential hazards and be knowledgeable about means of dealing with hazards. Although the full effects of this strategy will take time, gradual changes in awareness and attitudes should be apparent almost immediately and implementation of the strategy should be considered a high priority.

Short-Term Strategy

The short-term objective is to provide the present work force with the education and training it needs to help prevent accidents, injuries and illnesses in the workplace now.

Council emphasizes that this is an integral component of the life-cycle strategy. However, because there are serious problems with occupational health and safety in the workplace at present, there is an urgent and immediate need to focus extra attention on this aspect; i.e., there is an urgent and immediate need to devote effort and resources to developing awareness and knowledge in the people already in the workplace - both employers and workers.

There are, in the *Occupational Health and Safety Act*, legislated requirements for employers to provide information, instruction and supervision to a worker to protect the health and safety of a worker [section 14(2)(a)], and, in addition, to ensure that a worker exposed or likely to be exposed to a hazardous material or to a hazardous physical agent receives, and that the worker participates in, such instruction and training as may be prescribed [section 22g(1)].

Council recognizes that there are programs and materials currently available and that a number of organizations presently offer help in this area. However, standards or criteria for training are lacking, and there are few core courses. In most cases neither workers nor employers know what constitutes adequate instruction or training.

Council identified a number of steps that it considers essential:

1) Development of policy. Actions that should be taken by the government on policy issues include:

   - working with management and labour, the government should ensure

     - the development of:
       - standards and criteria for courses and training,
       - core programs to be used as a basis for workplace programs,
       - processes for ongoing evaluation that can be used by workers and employers in the workplace to evaluate the education and training being conducted;

- the use of standards and criteria to evaluate existing programs, materials and courses. If such materials and courses are considered adequate, their use in the workplace should be promoted;

- requiring employers to provide workers with paid-time to take the courses and/or participate in training sessions that are considered appropriate by joint health and safety committees;

- requiring employers to ensure that each workplace has an occupational health and safety policy.

2) Determination of the content and nature of programs. The following topics are among those considered important to be included in courses:

   - rights and responsibilities under the Act;

   - joint health and safety committees: structure, functions, etc.;

   - general hazard awareness - how to approach a task and the workplace with an eye to identifying potential hazards;

   - specifics relevant to individual tasks, substances or processes, e.g. what the specific hazards are, how to identify them, how to control them;

   - where to get further information and/or help;

   - what to do in an emergency;

   - how to continually evaluate and update the training being performed.

3) Determination of means of delivering occupational health and safety education and training programs that will maximize their impact. Factors that council considers will increase the effectiveness of training sessions include:

   - use of adult education techniques;

   - participant involvement;

   - special attention to the issues of literacy and language at individual workplaces;

   - ability of trainee to relate to trainer;

   - use of a variety of personnel in conducting sessions, e.g., workers, supervisors, managers or combinations, depending on agreements made by workplace parties;

   - relevance to specific work;

   - on-site location;

   - continuing education, frequent reinforcement and periodic updating and upgrading;

   - frequent evaluation and review of courses by workplace parties.

The importance of effective delivery is emphasized, and it is noted that, probably, many of the materials and programs currently available could be adequate for use in educating and training the workplace parties. A number of suggestions were made about how management and workers could, together, devise means of delivery that would suit the needs of a particular workplace, such as workers spending part of their lunch break and management giving equal time for safety talks, viewing videos or whatever is appropriate for the particular work setting.

ACOHOS RECOMMENDATION 89-28

that the Minister of Labour ensure that, together with management and labour, short-term strategies for improving the occupational health and safety training of workplace parties are developed and implemented as soon as possible. Such strategies should include:

a) development of standards and criteria for training and educational programs;

b) application of the standards and criteria to programs, materials and resources, including those already available, taking into consideration literacy levels and language differences;

c) development of core courses where necessary;

d) determination of effective means of delivery;

e) determination of processes for evaluation.

ACOHOS RECOMMENDATION 89-29

that the Minister of Labour ensure that workers are provided paid-time to obtain training in occupational health and safety.

ACOHOS RECOMMENDATION 89-30

that the Minister of Labour ensure that employers, together with workers in the workplace, develop and implement strategies to improve training and delivery of educational programs necessary for prevention of occupational illnesses and accidents in the workplace.

Council recognized that, especially in the short term, taking the steps outlined above (e.g. requiring employers to provide training for workers, using standards to evaluate programs, and providing core courses and other programs and resources) will help to achieve the objective but cannot, alone, ensure that the workplace parties will be adequately trained. Other factors that play a significant role include:

- management commitment to occupational health and safety;
- incentives for employers and employees; and
- enforcement.

Commitment from management could be for a variety of reasons such as: moral (i.e. a belief in the importance of the health and well-being of the workers); financial (i.e. a belief that a healthy and safe work force is more productive and less expensive in terms of benefits, absenteeism, etc., and will lead to reduced WCB assessments); other

practical considerations (e.g., fear of the implications of breaking the law) or because there has been a negative experience with an accident or illness at the workplace. Council considers that commitment has two preconditions: awareness and the belief that health and safety are important enough to warrant priority attention.

Incentives are often considered helpful to increase motivation for taking action. Just as there are a variety of reasons for commitment, different people will respond to different incentives. Financial incentives include reduced WCB assessments, tax credits or assistance with costs of training. Negative incentives (penalties and punishments) include threats of fines, bad publicity, etc.

It is considered that, just as it is important for employers to have incentives to obtain and provide education and training in occupational health and safety, workers should also have incentives to seek information, education and training. Much of a worker's incentive to seek information will depend on awareness, relevance of the information to the particular worker and the ability of the worker to take actions for his or her protection or the protection of others in the workplace. There will be a greater incentive for workers to obtain and use the knowledge/skills/information if they have the opportunity to be involved in decisions about the nature and form of programs as well as in the process of auditing acceptability, understandability and effectiveness.

Commitment to occupational health and safety should gradually increase and attitudes should change as the life-cycle strategy is implemented. In the meantime, requiring employers to have a health and safety policy and to provide paid-time for worker training should increase awareness. The desire for cost effectiveness and the threat of penalties should also help employers to place the priority on occupational health and safety education and training that council believes is required to help prevent occupational illnesses and accidents in the workplace.

Enforcement

To be effective, legislated requirements should be strictly enforced. Enforcement of requirements for employers to provide training can be difficult when there are no criteria or standards. Therefore, council considers that the development of criteria and standards will not only aid workplace parties in implementing and evaluating education and training programs but will also aid inspectors in enforcing the requirements.

ACOHOS RECOMMENDATION 89-31

> that the Minister of Labour ensure that the requirements of the Act and regulations are strictly enforced and that enforcement is based on clearly defined criteria and standards.

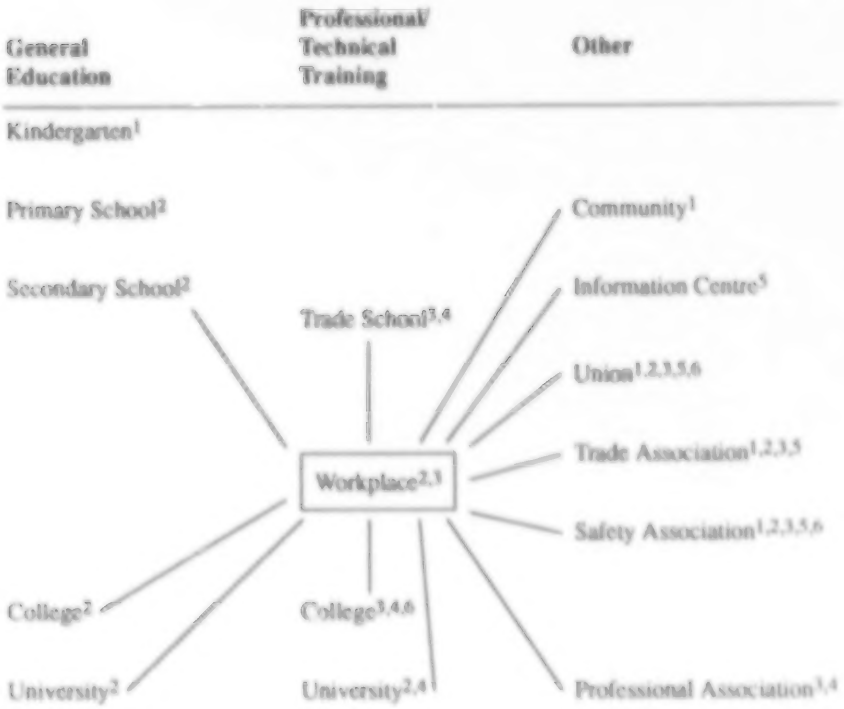
Inspections are considered to be of great value, not only for enforcement but also for increasing the awareness of employers, managers and/or supervisors, for acting as an incentive for action to be taken and for helping employers, managers, and workers' representatives and/or joint health and safety committee members to understand what is expected of them. By accompanying inspectors on their rounds, managers and worker-representatives can also, by example, gather information and training on the process of hazard identification.

References

1. Advisory Memorandum 78-III: Interim Recommendations on Manpower Planning and Funding Guidelines for Education and Training Programs in the Occupational Health and Safety Field. In: *Advisory Council on Occupational Health and Occupational Safety First Annual Report, April 1, 1978 to March 31, 1979.*
2. Advisory Memorandum 80-I: Policies and Principles for Manpower Planning and Educational Programs in the Field of Occupational Health and Safety. In: *Advisory Council on Occupational Health and Occupational Safety Third Annual Report, April 1, 1980 to March 31, 1981.*
3. Advisory Memorandum 89-II: Concerning Small Business. To be published in *Advisory Council on Occupational Health and Occupational Safety Twelfth Annual Report, April 1, 1989 to March 31, 1990.*
4. Advisory Memorandum 89-I: Concerning Bill 208: *An Act to amend the Occupational Health and Safety Act and The Workers' Compensation Act.* To be published in *Advisory Council on Occupational Health and Occupational Safety Twelfth Annual Report, April 1, 1989 to March 31, 1990.*

Figure 1

Institutions that are or could be involved with Occupational Health and Safety Education and Training



1) Mainly at the awareness level
2) Concepts and general knowledge, the Act etc.
3) Education on specific hazards substances, processes, etc.
4) Professional/technical training
   - Incorporation of safety into design and work practices (engineers, architects, etc.)
   - Training for health and safety professionals/specialists (physicians, nurses, hygienists, etc.)
5) Sources of information on specific substances, process, legislation
6) Specific 'administrative' skills needed to fulfil responsibilities on occupational health and safety in the workplace

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Office of the Minister
Bureau du Ministre

400 University Ave
Toronto, Ontario
M7A 1T7
416 965-4101

400 avenue University
Toronto (Ontario)
M7A 1T7
416 965-4101

March 28, 1990

Dr. Julian Barling
Chairman
Advisory Council on Occupational Health
and Occupational Safety
11th Floor, 400 University Avenue
Toronto, Ontario
M7A 1T7

Dear Dr. Barling:

Thank you for your letter dated February 14, 1990, submitting Advisory Memorandum 89-III: Concerning Education and Training.

The goal that Council identifies in the memorandum - a society that is aware of health and safety in all life's activities - is indeed an admirable one. It is certainly one that all of us would share, and the long-term strategy proposed to achieve this goal is one that I support.

The short-term objective identified by Council is to provide workers with the education and training needed to prevent accidents, illnesses and injuries in the workplace now. Again this is an objective I support, and this support is reflected in the increasing emphasis being placed on education and training in recent ministry initiatives such as WHMIS and Bill 208.

Great care must be taken to use training resources wisely since it is not possible to provide all of the needed training immediately. Priorities must be established. This is a task that I foresee for the proposed Workplace Health and Safety Agency.

Please convey my thanks to Council, and to the task force on occupational health and safety education and training, for the work they have done on this important issue.

Yours sincerely,

Gerry Phillips
Minister

Correspondence Concerning Biotechnology

Ontario

Advisory Council on Occupational Health & Occupational Safety

Conseil consultatif sur la santé et la sécurité au travail

Office of the Chairman

Bureau du président

400 University Ave. Toronto, Ontario M7A 1T7

416/965-2448

400, avenue Univers Toronto (Ontario) M7A 1T7

416/965-2448

October 20, 1989

The Honourable Gerry Phillips
Minister of Labour
400 University Avenue
14th Floor
Toronto, Ontario
M7A 1T7

Dear Mr. Phillips:

In June 1987 council submitted Advisory Memorandum 87-I on biotechnology to Mr. Wrye, then Minister of Labour. The accompanying letter noted that the document was intended to serve as a brief introduction to the subject and emphasized the need for the Ministry of Labour to develop an agenda for action to deal with biotechnology. It also noted that council would be prepared to consider some of the issues in greater detail.

Council is encouraged that the Green Paper initiative by the Ontario government is offering an opportunity for Ontarians to participate in the development of regulatory policy relating to biotechnology.

Council notes the short period allowed for public comment and has concerns lest the Green Paper deadlines preclude interested groups and individuals from giving the Green Paper and the topic of biotechnology the comprehensive attention they deserve. Council trusts you will make every effort to ensure that interested groups and individuals will have ample opportunity to participate in the policy development process.

Council has discussed whether or not it should review and comment on issues raised in the Green Paper and the process of policy development. As indicated by its Advisory Memorandum, council considers biotechnology an extremely important area where there is the opportunity to develop policy in a pro-active manner. The issues need to be considered in great detail and

council is establishing a task force for consideration of the Green Paper and the development of advice to you on biotechnology.

Yours truly,

Julian Barling
Chairman

c.c: G. Thomson
T. Millard

Ontario Ministry of Labour
Ministère du Travail de l'Ontario

Office of the Minister
Bureau du Ministre

400 University Avenue
Toronto, Ontario
M7A 1T7
416 965-4101

November 6, 1989

Mr. Julian Barling
Chairman
Advisory Council on Occupational
Health and Occupational Safety
400 University Avenue, 11th Floor
Toronto, Ontario
M7A 1T7

Dear Mr. Barling:

Thank you for your letter of October 20 on the subject of biotechnology.

I was pleased to learn that the Council is supportive of the initiative taken by the Government of Ontario to seek public input and participation in policy development relating to biotechnology. As I am sure Council will have noted, the initiative is being undertaken by seven ministries, proactively and collaboratively.

While the initiative is broadly based, I shall welcome Council's advice on those aspects of biotechnology that fall within its legislated mandate and which, I trust, will be forthcoming at an early date.

Yours sincerely,

Gerry Phillips
Minister

Ontario

Advisory Council on Occupational Health & Occupational Safety

Conseil consultatif sur la santé et la sécurité au travail

Office of the Chairman

Bureau du président

400 University Ave
Toronto, Ontario
M7A 1T7
416/965-2448

400, avenue University
Toronto (Ontario)
M7A 1T7
416/965-2448

January 3, 1990

The Honourable Gerry Phillips
Minister of Labour
400 University Avenue, 14th Floor
Toronto, Ontario
M7A 1T7

Dear Mr. Phillips:

As referred to in my letter of October 20, 1989, council continues to discuss biotechnology and its implications regarding health and safety in the workplace.

Consistent with our advice in June 1987, council still believes that there is the potential for a large number of workers in different sectors to be involved with biotechnological processes and products and that potential hazards exist. Although there is uncertainty about the seriousness of the effects that may accrue and the number of people who may be affected, the risk is not insignificant. Council considers that it is extremely important to determine the adequacy of the present system for dealing with biotechnology and the potential for hazard to workers.

You will be aware that the primary objective of the Joint Steering Committee on Hazardous Substances in the Workplace is 'to develop and review regulations for hazardous substances (including biological and physical agents) made under the Occupational Health and Safety Act'. Consequently, council recommends to you that the matter of biotechnology be raised for consideration with the Joint Steering Committee.

We request that you keep council informed during the various steps of this vitally important process, including whether or not you bring this matter to the Joint Steering Committee.

Yours truly,

Julian Barling
Chairman

c.c.: G. Thomson
T. Millard

Ontario Ministry of Labour
Ministère du Travail de l'Ontario

Office of the Minister
Bureau du Ministre

400 University Ave
Toronto, Ontario
M7A 1T7
416 965-4101

400, avenue University
Toronto (Ontario)
M7A 1T7
416 965-4101

February 15, 1990

Dr. Julian Barling
Chairman
Advisory Council on Occupational Health
and Occupational Safety
Ministry of Labour
400 University Avenue, 11th Floor
Toronto, Ontario
M7A 1T7

Dear Dr. Barling:

Thank you for your letter of January 3, 1990 in which the Advisory Council recommended that the matter of biotechnology be raised for consideration with the Joint Steering Committee on Hazardous Substances in the Workplace.

As you are aware, the government's biotechnology initiative is being undertaken jointly by seven ministries including our own (Agriculture and Food, Environment, Health, Industry, Trade and Technology, Natural Resources, and Treasury and Economics). These participants reflect the scope of the government's concern in this developing field, from potential risks to human health and the environment to potential benefits to Ontario citizens as well as encouragement of investment and growth in the industry.

At the same time, the Joint Steering Committee is very much absorbed with its current mandate of developing the legislative framework and policy for regulations dealing with worker exposure to hazardous chemical agents. While I am prepared to bring the biotechnology issue to its attention, I am not inclined to add this issue to the Steering Committee's existing task.

..../2

Thank you for the Council's advice concerning biotechnology. I look forward to receiving from the Council's task force, referred to in your letter of October 20, 1989, further advice and recommendations on this very important issue.

Yours sincerely,

Gerry Phillips
Minister

Other Correspondence

Advisory Council on Occupational Health & Occupational Safety
Conseil consultatif de la santé et de la sécurité au travail
Ontario

Office of the Chairman
Bureau du président

400 University Avenue
Toronto, Ontario
M7A 1T7
416/965-2448

June 23, 1989

The Honourable Gregory Sorbara
Minister of Labour
400 University Avenue
14th Floor
Toronto, Ontario
M7A 1T7

Dear Mr. Sorbara:

At the June 13 meeting of the Advisory Council, concern was expressed about the withdrawal of financing for the Canadian Centre for Occupational Health and Safety and the fact that the Ontario government has not been represented on the Centre's Council of Governors since September 1988.

The Canadian Centre is considered to be a major source of unbiased health and safety information available in a variety of forms to labour, management and the Canadian public. There was concern that without adequate funding the activities of the Centre would be in jeopardy and the benefits of an important national data base would be lost.

The need for such a resource is emphasized by recent federal-provincial initiatives and legislative requirements regarding the rights and responsibilities for the provision of information.

Council unanimously supported a resolution urging that you, as Minister of Labour for Ontario, do everything in your power to ensure that the investment and achievements of the Canadian Centre are preserved and that needed back-up resources are readily accessible and available for all Canadians including employers, workers, their representatives and individual citizens.

Yours truly,

D.R. McCalla
Chairman

cc: G.R. Thompson
T. Millard

Ontario Ministry of Labour
Ministère du Travail de l'Ontario

Office of the Minister
Bureau du Ministre

400 University Avenue
Toronto, Ontario
M7A 1T7
416/965-4101

September 11, 1989

Dr. J. Barling
Chairman
Advisory Council on
Occupational Health &
Occupational Safety
400 University Avenue
Toronto, Ontario
M7A 1T7

Dear Dr. Barling:

I am writing in response to Dr. McCalla's letter of June 23, 1989. In that letter, Dr. McCalla presented Council's concern on the federal government's withdrawal of financing to the Canadian Centre for Occupational Health and Safety.

I agree that the role of the Centre is an important one in providing workplace health and safety information. I have written the Minister of Labour Canada to ask that he ensure the Centre's survival in its transition to self-sufficiency. A copy of my letter is enclosed for your information.

Thank you for bringing this issue to my attention.

Yours sincerely,

Gerry Phillips
Minister

Attachment

Ontario
Ministry of
Labour

Ministere
du Travail
de l'Ontario

Office
of the
Minister

Bureau
du
Ministre

400 University Avenue
Toronto, Ontario
M7A 1T7
416 965-4101

August 31, 1989

The Honourable Jean Corbeil
Minister
Labour Canada
Ottawa, Ontario
K1A 0J2

Dear Mr. Corbeil:

I am writing about the withdrawal of federal funding to the Canadian Centre for Occupational Health and Safety.

A key principle in occupational health and safety is that workers and employers need information in order to make the workplace safe. The Centre is a vital provider of workplace health and safety information. Workers and the small business community are the main beneficiaries, but many of them could not afford to purchase such information and advice because of its cost.

The survival of the Centre is doubtful within the short time frame given the Centre to attain self-sufficiency. The Ontario Ministry of Labour is unfortunately not in a position to fund the Centre.

The Centre provides a valued social program and I ask that the federal government ensure the survival of the Centre through its period of transition to self-sufficiency.

Yours sincerely,

Original Signed by Minister

Gerry Phillips
Minister

Ontario Ministry of Labour
Ministère du Travail de l'Ontario

Office of the Deputy Minister
Bureau du sous-ministre

400 University Avenue
Toronto, Ontario
M7A 1T7
416 965-4115

March 19, 1990

Dr. J.T. Barling
Chairman
Advisory Council on Occupational
Health and Safety
11th floor
400 University Avenue
Toronto, Ontario
M7A 1T7

Dear Dr. Barling:

The Ministry of Labour has received requests from the Sikh community in Ontario for an amendment to its workplace safety legislation that mandates the wearing of a hard hat and potentially limits the wearing of the turban.

The Occupational Health and Safety Act does not provide exemptions from the hard hat requirements for any categories of workers. There appears to be no power to make such an exemption by regulation.

The Ministry is revisiting this question and considering the advisability of continuing its policy of providing for a single hard hat requirement for all workers.

On February 6, 1980, Dr. J.F. Mustard, then Chairman of the Advisory Council, wrote to the then Minister of Labour, Dr. R.G. Elgie, indicating that the Advisory Council did not support the idea of exempting any class of worker from the mandatory use of protective equipment.

As part of our review, the Ministry of Labour is asking for a statement of the current recommendation of the Advisory Council on Occupational Health and Safety on the issue.

Thank you for your cooperation.

Yours truly,

George Thomson
Deputy Minister

ADMINISTRATION

Legal Mandate of the Advisory Council

Section 10, the Occupational Health and Safety Act

Advisory Council on Occupational Health and Occupational Safety

10.–(1) There shall be a council to be known as the Advisory Council on Occupational Health and Occupational Safety composed of not fewer than twelve and not more than twenty members appointed by the Lieutenant Governor in Council on the recommendation of the minister.

Term of office of members

(2) The members of the advisory council shall be appointed for such term as the Lieutenant Governor in Council determines and shall be representative of management, labour and technical or professional persons and the public who are concerned with and have knowledge of occupational health and occupational safety.

Chairman and vice-chairman

(3) The Lieutenant Governor in Council shall designate a chairman and a vice-chairman of the advisory council from among the members appointed.

Vacancies

(4) The Lieutenant Governor in Council may fill any vacancy that occurs in the membership of the advisory council.

Remuneration and expenses

(5) The remuneration and expenses of the members of the advisory council shall be determined by the Lieutenant Governor in Council and shall be paid out of the moneys appropriated therefor by the Legislature.

Powers of advisory council

(6) The advisory council, with the approval of the minister, may make rules and pass resolutions governing its procedure, including the calling of meetings, the establishment of a quorum, and the conduct of meetings.

Idem

(7) The function of the advisory council is and it has power,

a) to make recommendations to the minister relating to programs of the ministry in occupational health and occupational safety; and

b) to advise the minister on matters relating to occupational health and occupational safety which may be brought to its attention or be referred to it.

Annual report

(8) The advisory council shall file with the minister not later than the 1st day of June in each year an annual report upon the affairs of the advisory council.

Idem

(9) The minister shall submit the report to the Lieutenant Governor in Council who shall cause the report to be laid bvefore the assembly if it is in session or, if not, at the next ensuing session. R.S.O. 1980, c.321, s.10.

Primary objective of advisory council

To advise the Minister of Labour on all matters relative to occupational health and safety in Ontario.

Secondary objectives of advisory council

1. To ensure as far as is possible that the policies and programs in occupational health and safety effectively minimize the risks to health and safety in all workplaces in Ontario.
2. To ensure as far as is possible that knowledge about occupational health and safety is available to management, labour and the public and that it is understood by them.
3. To assist in promoting and establishing mechanisms involving management and labour to solve problems in occupational health and safety.
4. To ensure as far as is possible that there is appropriate manpower training and development for the occupational health and safety field.
5.* To review periodically the effectiveness of the policies and programs implemented to achieve secondary objectives 1 to 4.

Terms of reference of advisory council

1. To make recommendations on matters referred to it by the minister, submitted to it by interested parties or pursued by the council on its own initiative.
2. To advise the minister on programs in the field of occupational health and safety.
3. To advise the minister on policies, principles and procedures used in standard setting and in the development of guidelines to be used by the government.
4. To review and make recommendations to the minister on the introduction of new substances such as chemicals into the workplace.
5. To review and make recommendations on the detection, measurement and control of occupational health and safety hazards in the workplace.
6. To review and make recommendations about the arrangements for occupational health and safety for groups and areas where there are no formal health and safety programs or the programs are judged to be inadequate.
7. To advise the minister on priorities for research and development in occupational health and safety.
8. To advise the minister on priorities for manpower training and development in the field of occupational health and safety.
9. To prepare an annual report to the minister, which shall include the advisory memoranda, recommendations of the council and the government response.

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* added June 1980

Meetings of the Advisory Council

April 11, 1989
May 9, 1989
June 13, 1989
September 12, 1989
October 10, 1989
December 12, 1989
January 9, 1990
February 26, 1990*

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* Included discussion with Minister and Deputy Minister

TASK FORCES

TASK FORCES OF ADVISORY COUNCIL ON OCCUPATIONAL HEALTH AND OCCUPATIONAL SAFETY

TASK FORCE ON SMALL BUSINESS

Terms of Reference

1) Review the *Occupational Health and Safety Act* and regulations and the ministry's policies regarding enforcement to identify differences in application for large and small workplaces.
2) Review data regarding the levels of occupational safety and health achieved in small as compared to large workplaces.
3) Review current initiatives to address the problems of health and safety in small workplaces being undertaken by associations, organizations and government departments in Ontario.
4) Review methods used in large companies to deliver health and safety practices to small units within a large workplace and/or to geographically distinct workplaces.
5) Identify significant factors that cause occupational health and safety conditions to differ between small and large workplaces, such as:
   - access to materials, resources and training;
   - motivating factors;
   - current means of disseminating information, etc.
6) Analyse the current policies and initiatives to determine whether they take into account the differences in conditions and whether the goal is uniform protection of health and safety in all workplaces (regardless of size).
7) Recommend strategies and means of implementing strategies to deal with the problems of health and safety in small workplaces.
8) Recommend means of auditing the effectiveness of the strategies (and their implementation) identified in 7.

Members

Council

D. Dewees – chairman
T. Byrne
D.R. McCalla
D.G. Morrison
H.D. Moyer
C.J. Tuohy
D. Ublansky

Others

J. Brophy – Windsor Occupational Health Information Service, Windsor
J.M. Andrew – Canadian Federation of Independent Business, Willowdale

Meetings Held
April 6, 1989
May 4, 1989
May 9, 1989
May 29, 1989

Reports to Council
June 13, 1989
September 12, 1989
October 10, 1989

Resulting in:
Advisory Memorandum 89–II

TASK FORCE ON OCCUPATIONAL HEALTH AND SAFETY EDUCATION AND TRAINING

Terms of Reference

1) To review current arrangements and structures for occupational health and safety education and training in Ontario and other jurisdictions.
2) To review previous recommendations by council regarding or pertinent to occupational health and safety education and training.
3) To recommend strategies for enhancing the quality, delivery and coverage of education and training for workplace parties, and in so doing, consider the potential for joint strategies with other government ministries/agencies and means of evaluation.

Members
D.R. McCalla – chairman (to July 1989)
J. Divitt
R. Falconer
H.D. Moyer
D.B. Smith
C.J. Tuohy

Meetings Held
October 5, 1989*

Reports to Council
December 12, 1989
January 9, 1990

Resulting in:
Advisory Memorandum 89–III

* J.I. Barling was chairman for October 5, 1989 meeting.

TASK FORCE ON STRESS

Terms of Reference

1) Consider the nature and definitions of occupational stress.
2) Consider the conditions at work that contribute to occupational stress.
3) Consider strategies needed to prevent and deal with problems associated with stress in the workplace.
4) Consider the existing legislative/regulatory mechanisms relating to problems concerning stress in the workplace.
5) Make recommendations to council.

Members

Council

J.I. Barling – Chairman
T. Byrne
A.G. Cecutti
R. Falconer
T.M. Fraser
H.D. Moyer
K. Signoretti
D. Ublansky

Meetings Held

January 8, 1990
February 12, 1990
March 13, 1990

BIOTECHNOLOGY GROUP

Members

Council

J.I. Barling - chairman
A.G. Cecutti
J.H. Couse
J.C. Divitt
T.M. Fraser
K. Signoretti
D. Ublansky

Others

J. Gawen - Allelix Crop Technologies
D.R. McCalla

Meetings Held

November 1, 1989

Reports to Council

December 12, 1989

Ontario
Ministry of
Labour

Advisory Council
on Occupational Health
and Occupational Safety

400 University Ave
Toronto, Ontario
M7A 1T7